B1 (Official Form 1) (1/08)

= 1 (01110101111111111111111111111111111								
UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION					Volui	ntary Petition		
Name of Debtor (if individual, enter Last, First, Middle): Work Zone Products, Inc				Name	of Joint Debtor (Sp	oouse) (Last, First, I	Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					the Joint Debtor in , and trade names):	the last 8 years		
Last four digits of Soc. Sec. or Individual-Taxpa than one, state all): 76-0514717	yer I.D. (ITIN) No./C	omplete EIN (if	more		ur digits of Soc. Sene, state all):	ec. or Individual-Tax	payer I.D. (ITIN) i	No./Complete EIN (if more
Street Address of Debtor (No. and Street, City, 6358 Pinemont Dr Houston, TX	and State):			Street	Address of Joint D	ebtor (No. and Stree	et, City, and State	e):
		ZIP CODE 77092						ZIP CODE
County of Residence or of the Principal Place of Harris	f Business:			County	of Residence or o	of the Principal Place	e of Business:	
Mailing Address of Debtor (if different from street	et address):			Mailing	Address of Joint I	Debtor (if different fr	om street address	s):
		ZIP CODE						ZIP CODE
Location of Principal Assets of Business Debtor	(if different from stre	eet address abo	ove):					ZIP CODE
Type of Debtor (Form of Organization) (Check one box.) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)	(Chec	Real Estate as d : 101(51B) roker) zation tates			I U.S.C. ed by an for a	(Check one bo	ox.) 5 Petition for Recognition In Main Proceeding S Petition for Recognition In Nonmain Proceeding Orimarily
Filing Fee (Che	,				k one box:	Chapter 1	1 Debtors	
 ✓ Full Filing Fee attached. ☐ Filing Fee to be paid in installments (applising signed application for the court's consider unable to pay fee except in installments. ☐ Filing Fee waiver requested (applicable to attach signed application for the court's count's count count's coun	ation certifying that t Rule 1006(b). See C chapter 7 individual	the debtor is Official Form 3A s only). Must		Chec	Debtor is not a smale k if: Debtor's aggregate a siders or affiliates k all applicable plan is being filed acceptances of the		as defined in 11 Lated debts (exclue)0,000.	J.S.C. § 101(51D).
Statistical/Administrative Information Debtor estimates that funds will be availat Debtor estimates that, after any exempt put there will be no funds available for distributions Estimated Number of Creditors	ole for distribution to operty is excluded a	nd administrativ			-	The state of the s	1	THIS SPACE IS FOR COURT USE ONLY
Estimated Assets	1,000- 5,000 \$1,000,001 on to \$10 million	5,001- 10,000 \$10,000,001 to \$50 million	10,001- 25,000 \$50,000 to \$100 i		25,001- 50,000 \$100,000,001 to \$500 million	100,000 10	ver 10,000] Dre than billion	
Estimated Liabilities So to \$50,001 to \$100,000 to \$11111111111111111111111111111111111	\$1,000,001	\$10,000,001 to \$50 million	\$50,000		\$100,000,001	\$500,000,001 Mo]	

B1 (Official Form 1) (1/08)		Page 2		
Voluntary Petition	Name of Debtor(s): Work Zone Pro	oducts, Inc		
(This page must be completed and filed in every case.)				
All Prior Bankruptcy Cases Filed Within Last	8 Years (If more than two, attach add	ditional sheet.)		
Location Where Filed: None	Case Number:	Date Filed:		
Location Where Filed:	Case Number:	Date Filed:		
Pending Bankruptcy Case Filed by any Spouse, Partner of	r Affiliate of this Debtor (If more t	than one, attach additional sheet.)		
Name of Debtor: None	Case Number:	Date Filed:		
District:	Relationship:	Judge:		
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition. Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, of title 11, United States Code, and have explained the relief available under e such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).				
	X			
		Date		
	hibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose Yes, and Exhibit C is attached and made a part of this petition.	e a threat of imminent and identifiable harm to	public health or safety?		
No.				
	hibit D			
(To be completed by every individual debtor. If a joint petition is filed, each Exhibit D completed and signed by the debtor is attached and materials.)		separate Exhibit D.)		
If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached.	ed and made a part of this petition.			
Information Regard	ling the Debtor - Venue			
	applicable box.)			
Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180 days	·	strict for 180 days immediately		
☐ There is a bankruptcy case concerning debtor's affiliate, general partr	ner, or partnership pending in this Distr	ict.		
Debtor is a debtor in a foreign proceeding and has its principal place of principal place of business or assets in the United States but is a defer or the interests of the parties will be served in regard to the relief sough	endant in an action or proceeding [in a			
I	des as a Tenant of Residential Prope	erty		
Landlord has a judgment against the debtor for possession of debtor	pplicable boxes.) s residence. (If box checked, complete	e the following.)		
(Name of landlord that obtained judgment)				
7	(Address of landlord)			
Debtor claims that under applicable nonbankruptcy law, there are circ monetary default that gave rise to the judgment for possession, after	umstances under which the debtor wou	•		
Debtor has included in this petition the deposit with the court of any re petition.	ent that would become due during the 3	0-day period after the filing of the		
Debtor certifies that he/she has served the Landlord with this certifical	tion. (11 U.S.C. § 362(I)).			
	(

7 (0110101 1 0111 1) (1700)	Maria Zana Brankaria kan		
Voluntary Petition	Name of Debtor(s): Work Zone Products, Inc		
(This page must be completed and filed in every case)	<u> </u>		
Sig	natures		
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under	Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.		
each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).	(Check only one box.) I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.		
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.		
X	X (Signature of Foreign Representative)		
Telephone Number (If not represented by attorney)	(Printed Name of Foreign Representative)		
Date	Date		
Signature of Attorney*	Signature of Non-Attorney Bankruptcy Petition Preparer		
/s/ Peter Johnson Peter Johnson Bar No. 10778400 Peter Johnson Suite 2820 11 Greenway Plaza Houston, Texas 77046	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.		
Phone No.(713) 961-1200 Fax No.(713) 961-0941 04/11/2008	Printed Name and title, if any, of Bankruptcy Petition Preparer		
Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)		
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.			
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. Work Zone Products, Inc	Address X		
X_/s/ Patricia Oakes	Date Signature of bankruptcy petiton preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.		
Signature of Authorized Individual Patricia Oakes Printed Name of Authorized Individual Provident	Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.		
President Title of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.		
04/11/2008 Date	A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. 8.110: 18 U.S.C. 8.156		

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UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Work Zone Products, Inc CASE NO

CHAPTER 11

EXHIBIT "A" TO VOLUNTARY PETITION

Debtor's employer identification number is	76-0514717			
If any of debtor's securities are registered under section 12 of the Securities and Exchange Act of 1934, the SEC file number is				
3. The following financial data is the latest available	information and refers to the debtor's	condition on		
a. Total Assets				
b. Total Liabilities				
Secured debt	Amounts	Approximate number of holders		
Fixed, liquidated secured debt				
Contingent secured debt				
Disputed secured debt				
Unliquidated secured debt				
Unsecured debt	Amounts	Approximate number of holders		
Fixed, liquidated unsecured debt				
Contingent unsecured debt				
Disputed unsecured debt				
Unliquidated unsecured debt				
Stock	Amounts	Approximate number of holders		
Number of shares of preferred stock				
Number of shares of common stock	1150	2		
Comments, if any				
4. Brief description of debtor's business: Traffic control and striping service				

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Work Zone Products, Inc CASE NO

CHAPTER 11

EXHIBIT "A" TO VOLUNTARY PETITION

Continuation Sheet No. 1

5	List the name of any person who directly voting securities of the debtor:	or indirectly owns	, controls, or holds, with power to	vote, 20% or more of the
6	List the name of all corporations 20% or rowned, controlled, or held, with power to PATRICIA OAKES 6358 PINEMONT HOUSTON, TX 77018		nding voting securities of which a	are directly or indirectly
I,	Patricia Oakes	the	President	of the corporation
	d as the debtor in this case, declare under pena is true and correct to the best of my information		have read the foregoing Exhibit "A"	to Voluntary Petition, and
Date:	04/11/2008	Signature: /s/ Par Patrici Presid	a Oakes	

Case 08-32384 Document 1 Filed in TXSB on 04/11/08 Page 6 of 44

B4 (Official Form 4) (12/07)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Work Zone Products, Inc Case No.

Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
	Name, telephone number and complete mailing address,		Indicate if claim is	
	including zip code, of		contingent,	
Name of creditor and complete	employee, agent, or department of creditor familiar		unliquidated, disputed, or	Amount of claim [if
mailing address, including zip	with claim who may be	Nature of claim (trade debt, bank loan,	subject to	secured also state
code	contacted	goverment contract, etc.)	setoff	value of security]
THE FROST NATIONAL BANK P.O. BOX 1600		Non-Purchase Money		\$361,863.07
SAN ANTONIO, TX, 78296				Value: \$0.00
THE FROST NATIONAL BANK		Non-Purchase Money		\$318,153.82
P.O. BOX 1600 SAN ANTONIO, TX, 78296				Value: \$0.00
THE FROST NATIONAL BANK		Non-Purchase Money		\$140,080.95
P.O. BOX 1600 SAN ANTONIO, TX, 78296				Value: \$0.00
Sherwin Williams		Tade Credit		\$71,388.22
6501 Antoine Dr Houston, TX 77091				
, , , , , , , , , , , , , , , , , , , ,				
Ennis Paint Co.		Tade Credit		\$67,000.00
P.O. Box 671185 Dallas, TX 75267-1185				
Danas, 17. 15201-1105				
Ennis Paint		Collecting for - Ennis Paint		\$67,000.00
		•		, . ,

B4 (Official Form 4) (12/07)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Work Zone Products, Inc Case No.

Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Continuation Sheet No. 1

	Comm	dation directive. 1		
Name of creditor and complete mailing address, including zip code THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, goverment contract, etc.) Purchase Money Security Interest	(4) Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured also state value of security] \$51,712.56 Value: \$0.00
American Express P.O. Box 630001 Dallas, TX 75363-0001		Tade Credit		\$43,000.00
3M P.O.Box 200715 Dallas, TX 75320-0715		Tade Credit		\$38,874.48
Nipon Carbide		Tade Credit		\$22,311.92
THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296		Non-Purchase Money		\$20,374.32 Value: \$0.00
Stuart Allen & Associates, Inc. 5447 E 5th Street, Suite 110 Tucson, AZ 85711		Collecting for - Potters Industries		\$15,101.45
STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024		Non-Purchase Money		\$14,384.25 Value: \$0.00

Case 08-32384 Document 1 Filed in TXSB on 04/11/08 Page 8 of 44

B4 (Official Form 4) (12/07)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Work Zone Products, Inc Case No.

Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Continuation Sheet No. 2

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address, including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured also state value of security]
Mikedon 9002 Wayfararer Ln. Box 750963 Houston, Texas 77275-0963		Tade Credit		\$13,604.93
Potters Industries Inc. PO Box 840 Valley Forge, PA 19482-0840		Tade Credit		\$13,131.45
The Childress Law Office 5100 Indian School Rd. NE Ste 28 Albuquerque, NM 87110		Collecting for - Nation Trench Safety		\$13,000.00
Paul Bettencourt Tax Assessor- Collector P.O. Box 4622 Houston, TX 77210		2007 Taxes		\$12,946.85
AB Gas Co. 4722 W 18th st Houston, TX 77092		Tade Credit		\$12,361.07
Grainger 8200 Pinemont Houston, TX 77040-6520		Tade Credit		\$12,100.71
Gulf States Asphalt Company, L.P. 300 Christy Place P.O. Box 508 South Houston, TX 77587-0508		Tade Credit		\$12,088.84

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B4 (Official Form 4) (12/07)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Work Zone Products, Inc Case No.

Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Continuation Sheet No. 3

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I,	the	President	of the	Corporation	
named	as the debtor in this case	, declare under penalty of	perjury that I have read the	ne foregoing list and that it is true and c	orrect to the
best of	my information and belief				
Date:_	04/11/2008	Sign	ature: /s/ Patricia Oake	S	
			Patricia Oakes		
			President		

Peter Johnson Peter Johnson Suite 2820 11 Greenway Plaza Houston, Texas 77046 (713) 961-1200 Attorney for the Petitioner 10778400

UNITED STATES BANKRUPTCY COURT FOR THE

SOUTHERN DISTRICT OF TEXAS **HOUSTON DIVISION**

11

In re:	Case No.:
Work Zone Products, Inc	SSN: _76-0514717
	SSN:
Debtor(s)	Numbered Listing of Creditors

6358 Pinemont Dr

Address:

Chapter:

Houston, Texas 77092

	Creditor name and mailing address	Category of claim	Amount of claim
1.	3M P.O.Box 200715 Dallas, TX 75320-0715	Unsecured Claim	\$38,874.48
2.	AB Gas Co. 4722 W 18th st Houston, TX 77092	Unsecured Claim	\$12,361.07
3.	Altus Athletic/OK-1 Mfg. 709 Veterans PO Box 8388 Altus, OK 73522	Unsecured Claim	\$472.60
4.	American Express P.O. Box 630001 Dallas, TX 75363-0001	Unsecured Claim	\$43,000.00
5.	Aztec Rental 2001 W. 34th Street Houston, TX 77018	Unsecured Claim	\$3,692.15
6.	Bartula Enterprises, Inc. 1051 Chesire Ln. Houston,Texas 77018	Unsecured Claim	\$3,791.85

	Debtor	Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim
7.	Batterson, Inc. 955 Judiway Houston, Texas 77018	Unsecured Claim	\$6,359.90
8.	Caterpillar Financial Services Corp. 2120 West End Ave. Nashville, Tenn. 37203	Unsecured Claim	\$766.59
9.	CenterPoint Energy PO Box 1325 Houston, TX 77251-1325	Unsecured Claim	\$0.00
10.	CenterPoint Energy 5130770-0 PO Box 2628 Houston, TX 77252	Unsecured Claim	\$0.00
11.	City of Houston Water Dept PO Box 1560 Houston, TX 77251	Unsecured Claim	\$582.15
12.	Coface Collections North America, Inc. P.O. Box 8510 Metairie, LA 70011	Unsecured Claim	\$0.00
13.	Dicke Tool Co. 36438 Treasury Center Chicago IL. 60694-6400	Unsecured Claim	\$489.30
14.	Donald C Young III, MD 427 W 20th Street, Suite 210 Houston, TX 77008	Unsecured Claim	\$450.00
15.	Energy Absorption Systems, Inc. 35 E Wacker Dr. Chicago, IL 60601	Unsecured Claim	\$9,200.00

III IE	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
16.	Ennis Paint	Unsecured Claim	\$67,000.00
17.	Ennis Paint Co. P.O. Box 671185 Dallas, TX 75267-1185	Unsecured Claim	\$67,000.00
18.	Exxon PO box 530962 Alanta, GA 30353-0962	Unsecured Claim	\$2,524.84
19.	Fatetteville Propane Company, Inc. PO Box 218 Fayetteville, TX 78940	Unsecured Claim	\$353.22
20.	Flint Trading, Inc. PO Box 160 Thomasville, NC 27361	Unsecured Claim	\$4,747.71
21.	General Truck Body 7110 Jensen Dr. Houston, TX 77093	Unsecured Claim	\$3,961.00
22.	Gilliam's Grocery Charge Accounts 714 Gene Street Buffalo, TX 75831	Unsecured Claim	\$981.58
23.	Grainger 8200 Pinemont Houston, TX 77040-6520	Unsecured Claim	\$12,100.71
24.	Graphic Solutions Group PO Box 671261 Dallas, TX 75267-1261	Unsecured Claim	\$1,035.07

	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
25.	Gulf States Asphalt Company, L.P. 300 Christy Place P.O. Box 508 South Houston, TX 77587-0508	Unsecured Claim	\$12,088.84
26.	Harris County xxx5801	Priority Claim	\$5,597.70
27.	Harris County xxx6160	Priority Claim	\$7,223.44
28.	Harris County P.O. Box 4576 Houston, TX 77210 xxxxxxxxx0000	Priority Claim	\$3.22
29.	Houston Alternator 1835 N. Shepherd Drive Houston, TX 77008	Unsecured Claim	\$294.46
30.	INTERNAL REVENUE SERVICE P O BOX 145595 MC 8420G CINCINNATI, OH, 45250-5595	Secured Claim	\$4,360.46
31.	Interstate All Battery Center 8350 Westheimer Houston, TX 77063	Unsecured Claim	\$1,966.90
32.	Kriscon 6800 Bingle Rd. Houston, tx 77092-1113	Unsecured Claim	\$3,702.47
33.	MERIT FINANCIAL, INC 10590 WESTOFFICE DR SUITE 280 HOUSTON, TX, 77042	Secured Claim	

	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
34.	Mikedon 9002 Wayfararer Ln. Box 750963 Houston, Texas 77275-0963	Unsecured Claim	\$13,604.93
35.	Munsch Hardt Kopf & Harr 3800 Lincoln Plaza 500 N Akard Street Dallas, TX 75201	Unsecured Claim	\$0.00
36.	Napa Auto Parts 5110 Antoine Drive Houston, TX 77092	Unsecured Claim	\$2,244.77
37.	National Signal, Inc. 9603 John St. Santa Fe Springs, CA 90670	Unsecured Claim	\$996.14
38.	NEC Financial Services PO Box 100558 Pasadena, CA 91189-0558	Unsecured Claim	\$393.36
39.	Nick's Diesel Service Interstate Billing Service, Inc. Dept. 1 PO Box 2153 Birmingham, AL 35287-1265	Unsecured Claim	\$3,393.37
40.	Nipon Carbide	Unsecured Claim	\$22,311.92
41.	Northwest Pipe Company 6307 Toledo Houston, TX 77008	Unsecured Claim	\$9,300.99
42.	Nut Place, Inc./The 6606 N. Gessner Houston, TX 77040 713-462-3147	Unsecured Claim	\$891.68

	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
43.	O'Rourke Petroleum 223 McCarty Dr Houston, TX 77029	Unsecured Claim	\$11,920.28
44.	Pacesseter Personnel Service P.O. Box 684005 Houston, TX 77268-4005	Unsecured Claim	\$80.62
45.	Paul Bettencourt Tax Assessor-Collector P.O. Box 7622 Houston, TX 77210 x-xxx7289	Priority Claim	\$27.46
46.	Paul Bettencourt Tax Assessor-Collector P.O. Box 4622 Houston, TX 77210 x-xxx6160	Priority Claim	\$12,946.85
47.	Phoneline Technologies, Inc. 6820 N Eldridge #502 Houston, TX 77041	Unsecured Claim	\$115.83
48.	Pitney Bowes PO Boxx 856390 Louisville, KY 40285-6390	Unsecured Claim	\$2,493.20
49.	Potters Industries Inc. PO Box 840 Valley Forge, PA 19482-0840	Unsecured Claim	\$13,131.45
50.	Premium Assignment Corporation 3522 Thomasville Rd. Suit 400 Tallahassee, FL 32309	Unsecured Claim	\$6,286.76
51.	Presco Products Co. P.O. Box 226467 Dallas, TX 75222-6467	Unsecured Claim	\$1,116.00

	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
52.	Sherwin Williams 6501 Antoine Dr Houston, TX 77091	Unsecured Claim	\$71,388.22
53.	Stasco 1140 Rothwell Houston, Texas 77002	Unsecured Claim	\$645.23
54.	State of Texas Comptroller of Public Accounts Revenue of Accounting Division P.O. Box 13528 Austin, TX 78711 xxxxxxx7176	Priority Claim	\$3,000.00
55.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxx3075	Secured Claim	\$3,938.46
56.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxxx3076	Secured Claim	\$2,577.36
57.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxx4367	Secured Claim	\$3,434.35
58.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxxx2914	Secured Claim	\$6,961.60
59.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxxx7252	Secured Claim	\$3,624.25
60.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxxx8032	Secured Claim	\$14,384.25

	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
61.	Stuart Allen & Associates, Inc. 5447 E 5th Street, Suite 110 Tucson, AZ 85711 xxxx8355	Unsecured Claim	\$15,101.45
62.	Team Ford 9965 Highway 6 Navasota, TX 77868	Unsecured Claim	\$100.00
63.	The Childress Law Office 5100 Indian School Rd. NE Ste 28 Albuquerque, NM 87110	Unsecured Claim	\$13,000.00
64.	THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Secured Claim	\$140,080.95
65.	THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Secured Claim	\$51,712.56
66.	THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Secured Claim	\$361,863.07
67.	THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Secured Claim	\$318,153.82
68.	THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Secured Claim	\$20,374.32
69.	TimeWise Delivery 1425 Overhill Suite 110 Houston, Texas 77018	Unsecured Claim	\$492.00

	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
70.	Tommie Vaughn Ford 1145 N. Shepherd Houston, TX 77008	Unsecured Claim	\$676.24
71.	Trafco Industries, Inc. 414 West Main Eagle Lake, TX 77434	Unsecured Claim	\$4,300.00
72.	Traffic Supply 500 FM 3013 W. EAGLE LAKE, TX 77434	Unsecured Claim	\$3,826.00
73.	Trailer Wheel & Frame 8222 N. Freeway Houston, TX 77037	Unsecured Claim	\$877.77
74.	Trantex 3310 Frick Road, Bldg. d Houston, TX 77086	Unsecured Claim	\$4,701.96
75.	United Rentals Highway Technologies 36353 Treasury Center Chicago, IL 60694-6300	Unsecured Claim	\$6,817.69
76.	Westside Automotive & Tire Service PO Box 41089 Houston, TX 77241	Unsecured Claim	\$895.08
77.	Wolf Recovery Systems, Inc. P.O. Box 207 Baytown, TX 77522	Unsecured Claim	\$2,500.00

Debtor	Case No. (if know
penalty for making a false statement or concealing property J.S.C. secs. 152 and 3571.)	is a fine of up to \$500,000 or imprisonment for up to 5 years or bo
	ARATION
Vork Zone Products, Inc	
	nat I have read the foregoing Numbered Listing of Creditors,
	at it is true and correct to the best of my information and belief.
best of my information and belief.	,
Debtor: /s/ Patricia Oakes	Date: 04/11/2008
Patricia Oakes	
President	
CERTIFICATION AND SIGNATURE OF NON ATTORNE	V DANKDUDTCV DETITION DDEDADED (200 44 U.S.C. \$ 440)
CERTIFICATION AND SIGNATURE OF NON-ATTORNE	Y BANKRUPTCY PETITION PREPARER (see 11 U.S.C. § 110)
	Y BANKRUPTCY PETITION PREPARER (see 11 U.S.C. § 110) C. § 110, that I prepared this document for compensation, and that I have
certify that I am a bankruptcy petition preparer as defined in 11 U.S. rovided the debtor with a copy of this document.	C. § 110, that I prepared this document for compensation, and that I have
certify that I am a bankruptcy petition preparer as defined in 11 U.S.	
certify that I am a bankruptcy petition preparer as defined in 11 U.S. rovided the debtor with a copy of this document.	C. § 110, that I prepared this document for compensation, and that I have
certify that I am a bankruptcy petition preparer as defined in 11 U.S. rovided the debtor with a copy of this document.	C. § 110, that I prepared this document for compensation, and that I have
certify that I am a bankruptcy petition preparer as defined in 11 U.S. rovided the debtor with a copy of this document.	C. § 110, that I prepared this document for compensation, and that I have

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Forms for each person.

IN THE UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE:	§	
	§	
Work Zone Products, Inc	§	No.
,	§	Chapter 11
	§	
DEBTOR(S)	§	

STATEMENT OF TAX RETURN BALANCE SHEET, STATEMENT OF OPERATIONS

The undersigned, being the authorized representative of the Debtor(s) in the above-styled case hereby certify under the penalty of perjury that the most recently filed federal tax return is attached hereto together with the most recent balance sheet and statement of operations or cash-flow statement.

Dated: April 11, 2008

/s/ Work Zone Products, Inc

/s/ Patricia Oakes

1:32 PM 04/10/08 Accrual Basis

Work Zone Products, Inc. Balance Sheet As of December 31, 2007

	Dec 31, 07
ASSETS	
Current Assets	
Checking/Savings Frost Bank - #50 9849173	16,973.53
Total Checking/Savings	16,973.53
Accounts Receivable	
Retainage Accounts Receivable Trade Accounts Receivable	15,778.06 547,816.73
Total Accounts Receivable	563,594.79
Other Current Assets	
Employee Advances	-84.02 3.377.00
Payroll Asset Note Receivable 000	-3,277.00 100,000.00
Retainage Held	
Retainage Account	-150.88
Retainage Held - Other	58,147.56
Total Retainage Held	57,996.68
Advances to employees	2,355.00
Note receivable Shareholder Loan	80,316.41 77,213.65
Undeposited Funds	21,206.89
Total Other Current Assets	335,727.61
Total Current Assets	916,295.93
Fixed Assets	
2005 Thermoplastic Trailer	49,469.06
Furniture & Fixtures Leasehold Improvements	52,389.66 9,228.12
Machine & Equipment	323,786.90
Trucks	
F650 Vehicle -2004 TMA	28,026.52
2006 Land Rover 2005 Ford F450	70,356.86 41,234.19
2005 Ford F550	39,311.87
2000 F650 TMA	31,646.11
2000 F350	24,459.79
2002 F150	15,169.42
2002 F250 TC 2003 Ford F250 Ext Cab	30,692.04 29,280.23
2003 Ford F250 Ext Cdb	37,003.11
2003 Ford F550 Striping	38,452.88
2003 Volvo Chasis	318,523.95
2004 GMC Yukon	22,000.00 210,342.00
2004 Isuzu (Paint Truck) Mercedez	42,294.55
Trucks - Other	9,503.00
Total Trucks	988,296.52
Accumulated depreciation	-702,185.27
Total Fixed Assets	720,984.99
Other Assets	po 000 C=
Mystery Asset	58,228.07 1,065.90
Organization costs Accumulated amortization	-1,065.90
Total Other Assets	58,228.07
TOTAL ASSETS	1,695,508.99
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	050 044 50
Accounts Payable	259,341.58
Total Accounts Payable	259,341.58

1:32 PM 04/10/08 Accrual Basis

Work Zone Products, Inc. Balance Sheet As of December 31, 2007

Credit Cards		Dec 31, 07
Other Current Liabilities Property Taxes - Building -6,387.69 Mystery Liability -1,243.03 Child Support Chris -704.99 Direct Deposit Liabilities -1,504.49 Child support Stan -3,741.84 Payroll Liabilities 69,484.66 Sales Tax Payable 44,043.89 Total Other Current Liabilities 99,946.51 Total Current Liabilities 99,946.51 Frost Bank #9003 - LOC 339,325.75 Frost Bank #9001 - LOC 339,325.75 Frost Bank #9001 - Equipment LOC 133,581.86 Frost Bank #9002 - Land Rover 51,073.46 Sterling Bank #210057252 20,295.76 Sterling Bank #311052914 16,457.42 Sterling Bank #311054367 16,859.77 Chase - 2002 Ford F150 -312.41 Mercedes Benz 27,227.11 Sterling Bank #112503076 10,480.00 Sterling Bank #21803075 4,416.08 Total Long Term Liabilities 960,951.60 Total Liabilities 13,29,050.55 Equity 51,294.71	Home Depot Office Depot	7,948.86
Property Taxes - Building -6,387.69	Total Credit Cards	8,810.86
Total Current Liabilities 368,098.95 Long Term Liabilities 339,325.75 Frost Bank #9003 - LOC 339,325.75 Frost Bank #9004 - SB P/O Loan 313,906.34 Frost Bank #9001 - Equipment LOC 133,581.86 Frost Bank #9002 - Land Rover 51,073.46 Sterling Bank #210057252 20,295.76 Sterling Bank #811052914 16,457.42 Sterling Bank #307058032 25,927.92 Sterling Bank #11054367 16,859.77 Chase - 2002 Ford F150 -312.41 Mercedes Benz 27,227.11 Sterling Bank #112503076 10,480.00 Sterling Bank #21803075 4,416.08 Total Long Term Liabilities 960,951.60 Total Liabilities 1,329,050.55 Equity Shareholder Investment -13,636.40 Common stock 38,534.74 Retained Earnings 392,854.81 Net Income -51,294.71 Total Equity 366,458.44	Property Taxes - Building Mystery Liability Child Support Chris Direct Deposit Liabilities Child support Stan Payroll Liabilities	-1,243.03 -704.99 -1,504.49 -3,741.84 69,484.66
Long Term Liabilities	Total Other Current Liabilities	99,946.51
Frost Bank #9003 - LOC Frost Bank #9004 - SB P/O Loan Frost Bank #9001- Equipment LOC Frost Bank #9002 - Land Rover Sterling Bank #210057252 Sterling Bank #811052914 Sterling Bank #307058032 Sterling Bank #11054367 Chase - 2002 Ford F150 Sterling -Old Loan Payment Sterling Bank #112503076 Sterling Bank #21803075 Total Long Term Liabilities Total Liabilities 1,329,050.55 Equity Shareholder Investment Common stock Retained Earnings Net Income -51,294.71 Total Equity 366,458.44	Total Current Liabilities	368,098.95
Equity -13,636.40 Common stock 38,534.74 Retained Earnings 392,854.81 Net Income -51,294.71 Total Equity 366,458.44	Frost Bank #9003 - LOC Frost Bank #9004 - SB P/O Loan Frost Bank #9001- Equipment LOC Frost Bank #9002 - Land Rover Sterling Bank #210057252 Sterling Bank #811052914 Sterling Bank #307058032 Sterling Bank #11054367 Chase - 2002 Ford F150 Mercedes Benz Sterling -Old Loan Payment Sterling Bank #112503076 Sterling Bank #21803075 Total Long Term Liabilities	313,906.34 133,581.86 51,073.46 20,295.76 16,457.42 25,927.92 16,859.77 -312.41 27,227.11 1,712.54 10,480.00 4,416.08
Shareholder Investment -13,636.40 Common stock 38,534.74 Retained Earnings 392,854.81 Net Income -51,294.71 Total Equity 366,458.44	Total Liabilities	1,329,050.55
• •	Shareholder Investment Common stock Retained Earnings Net Income	38,534.74 392,854.81 -51,294.71
		1.695.508.99

1:29 PM 04/10/08 Accrual Basis

Work Zone Products, Inc. Profit & Loss

January through December 2007

	Jan - Dec 07
Ordinary Income/Expense	
Income	
Negotiate	-1,188.74
Outside Income	1,042.37 521,472.98
Rental Income Sales	1,721,101.57
Sales Income	-1,520.00
	· · · · · · · · · · · · · · · · · · ·
Total Income	2,240,908.18
Cost of Goods Sold	7,047.04
Caterpillar Equipment Lease Job Materials	465,555.27
Job Labor	382,891.65
Fuel	77,478.10
Freight & Delivery	7,127.93
Equipment Repairs	6,800.34
Equipment Rental	8,385.80
Bid Expense	13,496.41
Auto Insurance	5,309.89
Total COGS	974,092,43
	<u> </u>
Gross Profit	1,266,815.75
Expense	060.33
Sterling Bank -#21803075 Sterling Bank -#210057252	969.33 966.51
Void	0.00
Reconciliation Discrepancies	-0.35
Reimbursement	2,959.50
Equipment Rental Expense	9,913.81
Mystery Expense	8,438.82
Quantity Variance	129.28
Construction Expense	14,200.00
Advertisement	6,415.41
Automobile Expense	8,979.24
Bad Debt	7,970.42
Bank Service Charges	25,364.79
Business Gifts	842.45
Computer	6,274.05
Consulting	52,034.00
Contributions	2,709.72
Credit Card Fees	968.62
Depreciation Expense	91,000.00
Dues and Subscriptions	18,467.74
Employee Benefit Expense	29,973.46 2,056.44
Employee Uniforms Insurance	98,882.55
Interest Expense	35,309.30
Lease	20,365.96
Licenses and Permits	2,960.78
Maintenance	12,601.02
Miscellaneous	1,918.99
Office Supplies	10,684.55
Payroll Expenses	568,959.30
Postage and Delivery	3,372.79
Printing and Reproduction	884.06
Professional Fees	24,327.27
Rent	95,383.76
Repairs	35,916.56
Security	2,419.90
Shop Supplies	22,154.17
Taxes Tolonhono	18,140.26 36,377.18
Telephone	30,377.18

1:29 PM 04/10/08 Accrual Basis Work Zone Products, Inc.
Profit & Loss
January through December 2007

	Jan - Dec 07
Training	4,250.00
Travel & Ent	14,856.84
Utilities	17,711.98
Total Expense	1,318,110.46
Net Ordinary Income	-51,294.71
Net Income	-51,294.71

ABERCROMBIE & ASSOCIATES, PC

14550 TORREY CHASE, SUITE 120 HOUSTON, TX 77014 (281) 440-5740 Client 11455100 April 18, 2007

Work Zone Products, Inc. P.O Box 924913 Houston, TX 77292-4913 713-290-9675

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Form 1120	2005 U.S. Corporation Income Tax Return
Form 2220	Underpayment of Estimated Tax by Corporations
Form 4562	Depreciation and Amortization
Form 4797	Sale of Business Property
Form 7004	Application for Automatic Extension
	Depreciation Schedules

TEXAS FORMS

Form 05-102	Texas Public Information Report	
Form 05-110	Texas Extension Request	
Form 05-142	Texas Franchise Tax Report	
	Texas Depreciation Schedules	
	-	400

FEE SUMMARY

Preparation Fee

905 FEDERAL INCOME	TAX SUMMAF	RY	PAGE
WORK ZONE PRO	76-051471		
	2005	2004	DIFF
GROSS RECEIPTS LESS RETURNS/ALLOWANCE. COST OF GOODS SOLD (SCHEDULE A). GROSS PROFIT. GROSS RENTS. NET GAIN (OR LOSS) FROM 4797.	3,891,016 1,911,900 1,979,116 0 -357	2,386,375 1,868,400 517,975 782,925 0	1,504,641 43,500 1,461,141 ~782,925 -357
TOTAL INCOME	1,978,759	1,300,900	677,859
DEDUCTIONS COMPENSATION OF OFFICERS SALARIES/WAGES LESS EMPLOYMENT CREDITS REPAIRS AND MAINTENANCE BAD DEBTS RENTS TAXES AND LICENSES INTEREST CONTRIBUTIONS DEPRECIATION ADVERTISING EMPLOYEE BENEFIT PROGRAMS OTHER DEDUCTIONS	380,477 230,623 47,291 407,991 41,945 114,442 71,316 3,353 180,061 7,931 0	127,130 204,979 31,978 85,400 45,438 144,793 69,101 6,416 179,649 1,860 28,080 318,335	253,347 25,644 15,313 322,591 -3,493 -30,351 2,215 -3,063 412 6,071 -28,080 144,821
TOTAL DEDUCTIONS	1,948,586	1,243,159	705,427
TAXABLE INCOME TAXABLE INCOME (LINE 28)	30,173	57,741	-27,568
TAXABLE INCOME	30,173	57,741	-27,568
TAX COMPUTATION TNCOME TAX	4,526	9,435	-4,909
TOTAL TAX	4,526	9,435	-4,909
PAYMENTS AND CREDITS TAX DEPOSITED WITH FORM 7004	0	9,525	-9,523
TOTAL PAYMENTS AND CREDITS	0	9,525	-9,52
REFUND OR AMOUNT DUE OVERPAYMENT OVERPAYMENT CREDITED TO NEXT YEAR UNDERPAYMENT PENALTY	0 0 182	25 25 65	-2: -2: 11
TAX DUR	4,708	0	4,70
SCHEDULE L BEGINNING ASSETS BEGINNING LIABILITIES & EQUITY	1,258,171 1,258,171	1,196,086 1,196,086	62,08 62,08
ENDING ASSETS. ENDING LIABILITIES & EQUITY.	1,342,748 1,342,748	1,258,171 1,258,171	81,57 84,57
TAX RATES MARGINAL TAX RATE EFFECTIVE TAX RATE	15.0% 15.0%	25.0% 16.3%	-10.0 -1.3

2005 FEDERAL BALANCE SHEET SUMI	MARY	PAGE 1
WORK ZONE PRODUCTS, INC.		76-0514717
ENDING ASSETS CASH ACCOUNTS RECEIVABLE LESS: ALLOWANCE FOR BAD DEBTS OTHER CURRENT ASSETS. LOANS TO SHAREHOLDERS BUILDINGS AND OTHER ASSETS. LESS: ACCUMULATED DEPRECIATION. INTANGIBLE ASSETS. LESS: ACCUMULATED AMORTIZATION. OTHER ASSETS. TOTAL ASSETS.	590,846 (0) 1,302,117 (1,054,118) 1,066 (1,066)	47,614 590,846 335,079 89,414 247,999 31,796
ENDING LIABILITIES & EQUITY ACCOUNTS PAYABLE. SHORT TERM NOTES PAYABLE. OTHER CURRENT LIABILITIES LONG TERM NOTES PAYABLE. COMMON STOCK ADDITONAL PAID-IN CAPITAL. UNAPPROPRIATED RETAINED EARNINGS. TOTAL LIABILITIES AND EQUITY.	2,000	340,239 399,837 64,712 364,704 2,000 36,535 134,721

2005 TEXAS INCOME T	PAGE 1		
SCHEDULE A GROSS RECEIPTS IN TEXAS. GROSS RECEIPTS EVERYWHERE. APPORTIONMENT FACTOR. STATED CAPITAL	2005 3,891,016 3,891,016 1.0000 2,000	2004 3,169,300 3,169,300 1.0000 2,000	DIFF 721,716 721,716 0.0000 0
SURPLUS TOTAL TAXABLE CAPITAL APPORTIONED TAXABLE CAPITAL NET TAXABLE CAPITAL TAX DUE ON NET TAXABLE CAPITAL	171,256 173,256 173,256 173,256 173,256 433	161,222 163,222 163,222 163,222 408	10,034 10,034 10,034 10,034 23
GROSS RECEIPTS IN TEXAS. GROSS RECEIPTS EVERYWHERE. APPORTIONMENT FACTOR. FEDERAL TAXABLE INCOME EARNED SURPLUS. APPORTIONED EARNED SURPLUS. APPORTIONED FARNED SURPLUS. NET TAXABLE FARNED SURPLUS. TAX DUE ON NET TAXABLE EARNED SURPLUS. NET TAX DUE ON NET TAX. EARNED SURPLUS. NET TAX DUE. TOTAL TAX DUE.	3,891,016 3,891,016 1.0000 51,071 51,071 51,071 51,071 2,298 2,298 2,298 2,298	3,169,300 3,169,300 1.0000 24,631 24,631 24,631 24,631 1,108 1,108 1,108	721,716 721,716 0.0000 26,440 26,440 26,440 26,440 1,190 1,190 1,190
AMOUNT DUE AND PAYABLE TOTAL TAX DUE PRIOR PAYMENTS NET TAX DUE TOTAL AMOUNT DUE AND PAYABLE	2,298 1,110 1,188 1,188	1,108 0 1,108 1,108	1,190 1,110 80 80
TAX RATES MARGINAL TAX RATE EFFECTIVE TAX RATE	4.5% 4.5%	4.5% 4.5%	0.0% 0.0%

2005	GENERAL INFORMATION		PAGE 1
	WORK ZONE PRODUCTS, INC.		76-0514717
FORMS NEEDED FOR THIS RE FEDERAL: 1120, 2220, 456 TEXAS: 05-102, 05-110,			
TAX RATES			
FEDERAL TEXAS		MARGINAL 15% 4.5%	15%
UNDERPAYMENT PENALTY FEDERAL			182.
CARRYOVERS TO 2006 FEDERAL CARRYOVERS CONTRIBUTIONS - PRIOR YE	ARS		2,473.
NET SECTION 1231 LOSSES			
FEDERAL 2005 LOSSES			357.
TEXAS			
2005 LOSSES			357.

Form **7004**

Application for Automatic 6-Month Extension of Time To File

Department of the Tre Internal Revenue Ser	easurv	Certain Business Inc	come Tax, e a separato ap	Information, and Other Return plication for each return.	rns OMB No. 1545 0237
"P"	Малте				Taxpayer identification number
Type or Print	ומכזש	K 7/ME DDODUCE THE			
		K ZONE PRODUCTS, INC., street, and room or suite number. If P.O.			76-0514717
Tile by the due late for the					
eturn for which	P.O	BOX 924913	e outles of a summing	o or state, and country (follow the country's practice for ent	
n extension is aquostod. See	1	in paint, and the money	ь, өпцег сягу, ргамно	a or state, and country (follow the country's practice for en	ering posial code).)
structions.	Hous	STON, TX 77292-4913			
aution: Car	efully	complete all items. Incor	rect informa	tion may cause delay or rejection.	
				nonth extension is for (see below)	
2 If the foreig	in cothe	oration does not have an office or	r place of busing	ess in the United States, check here	War T
ទ ០០៩១១ជូត្	necilli)	gramies under regulations secti	on +.6U81-5 (se	ee instructions), check hera	bp. (
4a Lor calenda	er year	20 $_05$, or other tax year beginni	ing	, 20, and ending	20
		his tax year is fess than 12 month			
loibat re	eturn			ason: counting period Consolidated return	. Jo. b., . Ct a
5 If the organ	zation	is a corporation and is the comm	ion parent of a g	group that intends to file consolidated, check	hera 💌 🏲
Also, you m	nusi aita	ich a schödule, listing the name,	address, and F	IN for each member covered by this extension	m.
6 Tentative to	tal tax	(see instructions)		******	i e i a soc
					6 4,526
/ Total paymo	onts an	d credits (see instructions)			7 0
8 Balance due	e. Subtr	act line 7 from line 6. Generally,	you must depo	sit this amount using the Electronic	
) Coupon, or Electronic Funds	8 4,526
tension For:			Form	Extension	Form
a žog c e ara.	· WARE		Code	is For:	Code
m 706-GS(I)	1 <u>721.11415111</u> 119(8)	The state of the s	02	Form 1120-L	18 19
missolic			08	Form 1120-ND (section 4951 taxes)	20
m 1041 (estate	AND THE PROPERTY OF THE PARTY O	anniana in 17 may may make a managan and a	04	onn (20 ±c. de la	7. Pr
m=10 41 (fris t)		<u></u>	-05	Form 1720-POL	22
m 1041-N	anara ara		06	F8/90 4/20 H 3/F	25.
m (04) (0m)	ACCOUNT OF T		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Manual Control of the	24
m 1042 m 1066	diplication		80		25
m 1065-B	and the state of t		09	Form 1120-37	26
n: 1056: 177			10	Form 8612	
m 1120		TO A WAR THE WAY THE TO SHAW TO SHAW THE WAY THE SHAW THE	12	7 cm 6012	28
n 1720 (süheh	#Stenit	cooperative, romative,	15	Form 8725	
m 1120-A		, and the state of	1	1 min - 1 min	***************************************
	3741 P. Server 450	THE PERSON AND THE PE	14	Form 8804: The second s	30
			14 15	Form 8804	30 31
		S L L MAN AND AND AND AND AND AND AND AND AND A		Tanas management and a second	30 31 32
m II20-FSC		S L L MAN AND AND AND AND AND AND AND AND AND A	16 16	Form 8831	30 31 32 33

CPCZ0701L 12/08/05

For			U.S. Corporation Income Tax Return For calendar year 2005 or tax year beginning, 2005, ending		OMR No. 1545-0123
Dopo	rterent et (l ial Revenur	he Freasury n Service	See separate instructions.	_ '	2005
A C	heck if:	r gelyen i	THE ALL OF THE PARTY OF THE PAR	B Employer i	dentification number
2 P	riscoal hole Inscoal hole Inscoal hole Inscoal hole	ding	Use IRS label WORK ZONE PRODUCTS, INC.		14717
	Hedule PH Noonal Son		print or P.O BOX 924913	C Date Incorp	
(23	ee instructi	ions).	1 UCHCTON TV 77700 4045	B Total assets	/1996 (nec instructions)
4) 3c (a)	thodule M-a ttach Sch N	3 required vt-3)		\$	1,342,748.
	heck if:		ial return (2) Final return (3) Name change (4) Address change	17.	2, 177, 1,30
		iross receipts o	if sales 3,891,016. b Loss roturns & allowances. c Balance	⊭ 1c	3,891,016.
	2 (lost of good	ls sold (Schedule Λ, line 8)	2	1,911,900.
	3 (ìross profit.	Subtract line 2 from line 1c	3	1,979,116.
N	4 0	Dividends (S	chedule C, lino 19)	. 4	
C	5 Ir	nterest		. 5	
O M	7 0	arosa roma. Seore encesti:	60	{ ·	
E,	8 0	aross ruyanu Sandal esis r	CS.	7_	
	9 N	let dain or d	net income (attach Schedule D (Form 1120)).	. 8	
	10 0	ther income (so	loss) from Form 4797, Part II, lino 17 (attach Form 4797). se instructions — attach schedule)	9	
	T II	otal income	Add lines 3 through 10	10	
	12 C	ompensatio	n of officers (Schedulo E, line 4)	17	1,978,759. 380,477.
D F	1 12 2	alaries and	wages (less employment credits)	13	230,623.
E B R	144 170	epairs and r	maintenance	1/1	47,291.
EDUC.	15 B	ad debts		. 15	407,991.
T ta	17 13	aves and lie	coses SEE STATEMENT 1		41,945.
) ₁	18 In	iterest.	SIE STATEMENT.I.	17	114,442.
NI	19 CI	haritable cor	ntributions (see instructions for 10% limitation)	18	<u>71,</u> 316. 3,353.
SIO	20a D	epreciation ((attach Form 4562)		
8 5 E oi	h i.c	oss doprecia	ation claimed on Schedule A and elsewhere on return	20 c	180,061.
t O	21 Do	epiction		. 21	
? 1	23 Pe	overusing Posiop profi	it-sharing, etc, plans.		7,931.
25 - C	24 Fr	mplovee ber	notit programs	. 23	
RUCTI	25 Da	omestic proc	duction activities deduction (attach Form 8903)	. 24	
T o	26 Oth	her deductions	(attach schedule)	26	463,156.
N S	27 To	otal deductio	ons. Add lines 12 through 26	► 27	1,948,586.
5	28 Ta 2 9 Le	Xable income h	efore net operating loss deduction and special deductions. Subtract line 27 from line 11		30,173.
	ZJ LE	:55, arnele h Sha	porating loss deduction (see instructions) 29 a		
T	30 Ta	vable incom	cial deductions (Schedule C, line 20). 29 b ne. Subtract line 29c from line 28 (see instructions if Sch C, line 12, was completed)	29 c	
À	37 To	stal tax (Sch	nedule J, linc 11)	. 30	30,173.
X		iyments: a	7004 overpayment credited to 2005. 32 a	31	4,526.
A N	Ь 20	05 estimate	Clux payments. 32b		
ñ	c. Les	ss 2005 refund :	applied for on Form 4455, 32 c d Bal► 32 d 0		
р			with Form 7004	Sampling April	
A		dits: (1) Form	71.70	32 g	0.
M	33 Es	irmated tax	penalty (see instructions). Check if Form 2220 is attached ► X	33	1.82
FN	34 Ta	x due. If lind	e 32g is smaller than the total of lines 31 and 33, onter amount owed	34	4,708.
7	35 Ov	erpayment.	If line 32g is larger than the total of lines 31 and 33, enter amount overpaid.	35	
S	36 Fuli	ac amount of fu	no 35 you want. Cradited to 2006 actions had to:	36	
ign lere	and bells	ef, it is true, cor	v. I declare that I have examined this roturn, including accompanying achedules and statements, and to the best of my know rect, and complete. Declaration of preparer (other than taxpayor) is based on all information of which preparer has an	infige r knowledge. M	ay the IRS discuss that then with the preparer
(U) C	₽	nature of officer			nown bolow? (see inst)
	·	Preparer's		rs SSN or PTIN	X Yes No
aid		nignature	BERNARD ABERCROMBIE Check if solt POOT	.82748	
	arer's	Firm's Name (or yours if	ABERCROMBIE & ASSOCIATES, PC	20-069	5 <u>931</u>
58 (Only	address, and	D. ► 14550 TORREY CHASE, SUITE 120		
ΔΛΓ	Enr Deb	ZIP code	HOUSTON, TX 77014	m. (281)	440-5740
mrs F	OF FILLS	acy ACT BUG	Paperwork Reduction Act Notice, see separate instructions. CPCA0205L 12/12/06	5	Form 1120 (2005)

1.	MANAGORA GOSTOTISANAE	PRODUCTS, INC.				Flage 2
1.11	Inventory at beginning of year. Purchases	Join (see instructions	<u>;) </u>			71,30,-10
	2 Purchases		• • • • • • • • • • • • • • • • • • • •			1
	2 Purchases					2 997,676.
						3
	Other costs (attach schedule) Total, Add lines 1 through 5.			Carlos Company		4
						5 914,224.
	7 Inventory at end of year 8 Cost of goods sold. Subtract fin	****	*****			6 1,911,900.
			ere and on name	1 Eng 5	• • • • • • • • • • • • • • • • • • •	7
	9a Check all methods used for value	ing closing inventory:	a mini day bandda	:, 10165 N		8 1,911,900.
	(i) Cosi	- 2,-				
	(ii) Lower of cost or market					
	(iii) Other (Specify method trans and	d allock avadouskies X	San .			
	(iii) Other (Specify method used and b Check if there was a writedown of	or account explanation,) , .				
	b Check if there was a writedown of Check if the LiFO inventory method.	of subnormal goods				
						· · · · · · · · · · · · · · · · · · ·
	computed under LIFO	s used for this tax year,	enter percentage	: (or amounts) of ប	osing inventory	
		a va togale, do mé tille	S Of Section 2634	annly to the corn.	<u>5</u>	<u> </u>
COMMO	closing inventory? If 'Yes,' attach	explanation.	vaidations belwe	en opening and		
Sc	hedule C Dividends and S	pecial Deductions		<u> </u>	<u> </u>	
	(see instructions)	I a.m americality		(a) Dividends received	(b) Percontage	(c) Special deductions
7	Dividends from lass the con-			16061000		(a) x (b)
	Dividends from less-than-20%-ow than debt-financed stock)	ned domestic corporatio	ns (other			
2	Dividuents 4. God	**********			70	
_	Dividends from 20%-or-more-owns than debt financed stock	ed domestic corporation	s (other			
3	than debt financed stock) Dividends on debt-financed stock of domes	Control Control Control Control			80	
4	The state of the s				SEE INSTR.	
5	Dividends on certain preferred stock of 20%	A or more event and the little	J#S		42	
в	Dividends from less-than 2004 owned facility	a-or-righte-owned bright diffillity	S		48	
7	Dividends from less-than-20%-owned foreign	on corporations and certain FS	Cs		70	
8	Dividends from 20%-or-more-owned foreign	n corporations and certain FSC	s		80	
9	Dividends from wholly owned forci	gn subsidiaries			100	
10	Total. Add lines I through 8. Seo i	nstructions for limitation	777574 777574	Carlos Salva Valentia		2
11	company operating under the Small Busines	ed by a small business investi s investment Act of 1966	nent	AND AND THE PROPERTY OF THE PR	100	
12	Dividends from affiliated group mer	mbers and cortain FSCs			100	
13	Dividends from controlled foreign o	corporations (attach I orn	n 8895)		85	
14	Dividends from foreign corporations not inch	uded on lines 3, 6, 7, 8, 11, or	12			AND A STATE OF THE PROPERTY OF THE PARTY OF
	Income from controlled foreign corporations	under subpart F (attach Form(s) 547†)			
16	Foreign dividend gross-up					
17	IC-DISC and former DISC dividends not inclu Other dividends.	uted on lines 1, 2, or 3			Control of the Contro	
19	Deduction for dividends paid on certain profe	rred stock of public utilities	William W.			
20	Total dividences. Add lines 1 through 1/. Ent	er here and on page 1, line 4.	· · · · · · · · · · · · · · · · · · ·	1		100 (100 (100 (100 (100 (100 (100 (100
ılغد	Total special deductions. Add lines edule. Compensation of	Officers (nter hore and or	i page 1, line 29h.	5-	
	Note: Complete Sched	ule E only if total receipt	ions for page 1,	line (2)		1,540
1	(a)	1 10000	S (mile 19 pius n	nes 4 through 10 o	n page I) are \$500,000) or more.
	Name of officer	(b) Social security number	time devoted	Licident of cor	poration stock owned	(f) Amount of
ΑTI	RICIA ONKES	453-15-6783	to_business	(d) Common	(c) Preformed	compensation
		+=33-13-6783	1.00 %	100 9		380,477.
	and the same of th			<u> </u>	8	
			<u>o</u>		6.	
				2		
2	lotal compensation of officers		<u> </u>		3	
3 (Componsation of officers claimed on	Schedulo A and assets			· · · · · · · · · · · · · · · · · · ·	380,477.
4 :	Subtract line 3 from line 2. Enter the	result here and eisew!	iore on roturn			
	310	and on bag	- G MAC [2			380,477

CPCA0212L 12/19/05

Form 1120 (2005)

	m 1120 (2005) WORK ZONE PRODUCTS, INC. hedula Tax Computation (see instructions)	:)	5-0514717	TART AND LINE	TO THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRES	Page
.] נונפימו	Check if the corporation is a member of a controlled g	roup			F (347)47,410	
	Important: Members of a controlled group, see instruc			• • • • • • • • • • • • • • • • • • • •	Control of the contro	
2	A if the hox on long 1 is checked, enter the corporation's share of the \$	ፍ <u>ስ በበስ</u> . ቁ ያፍ ሰብ	0. & \$9.925 000 taxa)	ole income brackets (in that order):	
	(1) \$ (2) \$ b Enter the corporation's share of: (1) Additional 5% tax (n	,	(3)	5	The state of the s	
	b Enter the corporation's share of: (1) Additional 5% tax (n	ot more than S	311,750)	Ś	200 (100 (100 (100 (100 (100 (100 (100 (
	(2) Admining 3% tax (n	ut more than :	(100,000)	. \$	And John Co.	
3	 income tax, Check if a qualified personal service corp. 	oration			para (S.) P. A.	
	(see instructions)				>- 3	4,526.
4	Alternative minimum tax (altach Form 4626)					
5					15	4,526.
6	a Foreign tax credit (attach Form 1118). b Possossions tax credit (attach Form 5735)			6.8	And Francisco	4/1/2.0.
	b Possessions tax credit (attach Form 5735).			65	The production of the control of the	
	c Credits from: Form 8834 Form 890	17. line 23.		60	A CONTROL OF THE CONT	
	d General humaness credit. Check however, and indicate a	dalah baraman	was selectived	Printed (htt)	1,34 (10,2,32.1) (4,1) he (10,340.1)	
	Form 3800 Form(s) (specify). See Credit for prior year minimum tax (attach Form 8827). f Bond credits from: Form 8860 Form 891 Total credits. Add lines Se through 68	,		6.0		
	e Credit for prior year minimum tax (attach Form 8827).	· · · · · · · · · · · · · · · · · · ·		6.0		
	f Bond credits from: Form 8860 Form 891	2		66	January January	
7	· otal oroginal Ann area og arrogan in .				1 7 1	
8	Subtract line 7 from line 5				0	1,526.
9	Personal holding company tax (attach Schedule PH #	orm 11200				11 - 2540 .
10	Form 4255 Form 8611	Harm 950)	· · · · · · · · · · · · · · · · · · ·		- Spanner	
	1 0117 0011	1 0000			10	
71	Total tax. Add lines 8 through 10, Enter here and page	f Con 21	schenne)	• • • • • • • • • • • • • • • • • • • •	10	A 17.3 d
Sc	hedule K Other Information (see instructions	1, 1110 31.			1 13	4,526.
1	Check accounting method:	Yes No				
	a Cash b X Accrual		7 At any time	division the torus	ear, did one foreign perso	Yes No
	. I i.e.	120000	own, directl	v or indirectly, at	Heast 25% of (a) lbd total	
2	See the instructions and enter the:		voting powe	er of all classes d	of stock of the corporation.	
	4 Originase activity code tio. ► 738 and		entitied to v	ole or (b) the tot cornoration?	at value of all classes of	X
1	Business activity - CONSTRUCTION PRODUCT		If 'Yes,' ent	er: /a) Percentan	e owned	W
	c Product or service ► ROAD BARRICADES			ier's country ➤		[6000 to Mark 503
3	At the end of the tax year, did the corporation own, directly or indirectly, 50% or more of the voting stock			•	file Form 5472	
	of a domestic corneration? (For ridge of obstaction	and the state of t	Information	Return of a 25%	file Form 5472, Foreign-Qwned U.S.	70.0
	see section 267(c).). If "Yes," attach a schodule showing: (a) name	. X	a U.S. Trad	or a Foreign Coa Sor Business Fi	poration Engaged in ofter number of	Made Sayes
	and employer identification number (FIN). (b)					Pro-Col. Edglard, Carriette (Edglard) Col. Pri Col. (Edglard)
	- percentage owned, and (c) taxable income or				mon issued publicly offere	d bearings
	(loss) before NOL and special deductions of such corporation for the fax year ending with or within your tax year.		debt instrun	onts with origina	al issue discount	
	your tax year.		If checked,	the corporation n	nav have to file Form 828	1.
4	Is the corporation a subsidiary in an affiliated group		Information	Return for Public	nay have to file Form 82 8 By Offered Original Issue	PVR 7 SEVE
	or a parent-subsidiary controlled group? If 'Yes,' enter name and EIN of the parent corporation	. X		struments.	mpt intorost received or	Garage Control
	in rest, enter name and this of the parent corporation		accrued dur	noum or tax exer ing the tax year.	mpt morost received or • • •	NONE
	and the second part was also been also to the second part and the		10 Enter the or	ing the lax year. Imber of sharebo	Idors at the end of the tax	
5	At the end of the tax year, did any individual, part-	Page 300 bearing 15th				1
	nership, corporation, estate or trust own, directly or indirectly, 50% or more of the corporation's voting		11 If the corpor	ation has an NO	L for the tax year and is e	ectina Programm
	stocks (For rules of attribution, see section $267(c)$.)	X			d, check hero	
	If 'Yes,' attach a schedule showing name and				eled return, the statement require	
	identifying number. (Do not include any information already entered in 4 above.)		Femiporary Regi	∍lations section 1.150	2-21T(b)(3) must be attached or	the Figure
	Inter % owned ► 100.%		election will not			
	SEE STATEMENT 5		12 Enter the av	atlable NOL carr	yover from prior lax years uction on line 29a.)	
6	During this lax year, did the corporation hav dividends		(DO HOCTEGE ► B		uction on time 29a.)	3424 1226 3425 1226
	(other than stock dividends and distributions in exchange for stock) in excess of the corporation's			NONE	coipts (line Talplus lines 4	Serial Trans
	current and accumulated earnings and profits? (See	200400000000000000000000000000000000000	through 10 o	n nade I) for the	rtax vear and ils folal ass	ets ["""
	sections 301 and 316.)	. X	at the end of	the fax year less	s than \$250,000?	X
	If 'Yes,' file Form 5452, Corporate Report of		If 'Yos,' the o	orporation is not	required to complete a page 4. Instead, enter ti	TATAL CAPTA
	Nondividend Distributions. If this is a consolidated return, answer here for the		total amount	of cash distribut	n page 4. Instead, enter ti ions and the book value o	ne Reminis
	Darent Corporation and on Form 851. Affiliations		property dist	ributions (other t	han cash) made during the	t kin ke
	Schedule, for each subsidiary.		tax year. 🛧	\$		
lote	If the corporation, at any time during the tax year, had	assets or o	perated a busine	ess in a foreign d	ountry or U.S. possession	n. il may he
CCILII	rod lo attach Schedule N (Form 1120), Foreign Operation	is of U.S. (Corporations, to	this return, See S	Schedule N for details.	7
AΑ			I tott blac			

CPCA0234L 10/17/05

Form 1120 (2005)

Note: The corporation is not required to complete Schedule 4. Balance Sheets per Books	Schedules I, M-I a.	5-0514717 nd M-2 if Question 13 on Sch	a children to the	F\;
Assets	Bogir	ning of tax year	edilić K is answered '	Yes.
7 Cash	(a)	(4)	EINIO	flax year
Za Trade notes and accounts receivable.		14,953.	(c)	(d)
b Less allowance for bad debts	736,5	83. Transmi i		47,6
3 Inventories.	M	736, 583	<u>590, 846</u>	
4 U.S. government ability-figure				590,8
U.S. government obligations Fax-exempt securities (see instructions).				
6 Other current assets (attach schedule). SEE ST 6				
7 Loans to shareholders		80,316.		
8 Mortgage and real estate leans.	. 6-1-1-1	89,414.		335,07
9 Other investments (attach schedule)				89,41
10a Buildings and other depreciable assets.				L
b Loss accumulated december assets.	1,175,13	8.		San Landa
b Loss accumulated depreciation.	869,91	305,227.	<u>1,302,117.</u>	
11 a Depletable assets. Dites accomplished desired			1,054,118.	247, 999
b Less accumulated deptetion.		1		
12 Land (net of any amortization)		A CONTRACTOR OF THE CONTRACTOR	CHARLES THE CONTRACT OF THE CO	
13a Intangible assets (amortizable only). b Less accumulated amortization.	1,066			TAPA
14 Other assets (altach schedule)	1,066	our connection of the Manager of the		
15 Total assets		3.1,678	1,066.	
15 Total assets Liabilities and Shareholders' Equity		1,258,171		31,796
16 Accounts payable				1,342,748
Mortgages, notes, bonds payable in less than 1 year		318,661.		
'S Summer Content (Simplifies (allach erb) Clare com e &		398, 365.		<u> </u>
'mis rom shareholdere &		8,194	-	399,837
wortgages, notes, bonds navable in Lyear or was				64,712
* Committee (attach schedula)		369,729		364,704
* Capital Stock: a Preferred stock: ""	ances recommendation and the second second			
b Common stock	2,000		1000	A Commence
(2) (2) (2) (3) (3) (4) (3) (4) (4) (4) (4) (5) (5) (5) (5) (5) (5) (5) (5) (5) (5		$\frac{2,000.}{36,535.}$	2,000.	2.000
The state of the s		T 30, 335.		<u>2,000</u> <u>36,535</u> .
The state of the s		124,687		
Adjunct to shareholders' county (att sch). 7 Less cost of treasury stock.		- <u>- 127, 00 / - </u>		134,721
Total habities and about the				
hedite Mail: Reconciliation of Income (I		1,258,171		
Not income (loss) per health	L <u>oss) per Book</u> s	With Income per Retu	PA .	1,342,748.
Federal income tax per books.		7 Income recorded on his	(see instructions)	MOST U.S. Marie in the Control
Excess of capital losses over capital gains	10,141.	7 Income recorded on be included on this return	OKS INIS Year not 1	
Income subject to tax not recorder on books	William Company of the Company of th	Tax exempt interest \$	(nomze):	
this year (itemize):				
Expenses recorded on books this year not	No Retromando, anterior	8 Deductions on this return not o		SAGING SAGARAN
deducted on this return (itemize):		against book income this year	marged Paris	
Depreciation & Millian				
Charitable contributions \$		b Charitable contribus \$		
Travel & entertainment &			∠,993.個顯	
Travel & enturtainment . \$ 8,518.				
4,473	· · · · · · · · · · · · · · · · · · ·			
Add lines 1 through 6	12,991			2,993
Add lines 1 through 5	33, 1.66	9 Add lines / and 8.		2,993.
edule M. 2. Analysis of Unappropriated Balance at beginning of year. Net income (loss) post-balance	Retained Earnin	GS ner Books (1 in 628) — line	6 less line 9	30,173.
Net income doesn't	124,687.	5 Distributions	Schedule L)	
	10,034.	- 2.50 EM (001/5	a Cash i	
Other increases (itemize):			C Property	and the second
		modreases (nemize)	i	
Add lines 1 2		7 Add lines		
Add lines 1, 2, and 3.	134,721.	r radumes bland 6		
•	CPCA0284L 10/17	8 Balance at end of year (line 4 les	s line 7).	134,721.

Form **2220**

Underpayment of Estimated Tax by Corporations

Internal Revenue Service	
Note: Gcnerally, the corporation is not required to file Farm 2220 (see Part II below for exceptions) because the IRS will figure an owed and bill the corporation. However, the corporation may still use Form 2220 to figure the panalty. If so, enter the amount 2, line 34 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220. Rate Required Annual Payment	y penally Int from pag
cover and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount Payment I Total tax (see instructions). 2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1. b Look-back interest included on line 1 under section 460(b)(2) for completed long term contracts or section 167(g) for depreciation under the income c Credit for Lederal tax paid on fuels (see instructions). d Total. Add lines 2a through 2c 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. 4 Linter the tax shown on the corporation's 2004 income tax return (see instructions). Caution: If the tax is line 3 on line 5. Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4. Frequired Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4. Frequired Reasons for Filling — Check the boxes below that apply. If any boxes are checked, the corporation mays till Eform. The corporation is using the adjusted seasonal installment method.	int from pag
1 Total tax (see instructions). 2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1. b Look-back interest included on line 1 under section 460(b)(2) for completed long term contracts or section 167(g) for depreciation under the income forecast method. c Credit for Lederal tax paid on fuels (see instructions). d Total. Add lines 2a through 2e. 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. 4 Enter the tax shown on the corporation's 2004 income tax return (see instructions). Caution: If the tax is line 3 on line 5. 5 Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, criter the amount from line 3. 6 The corporation is using the adjusted seasonal installment method. 6 The corporation is using the adjusted seasonal installment method.	4, 52
2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1. b Look-back interest included on line 1 under section 460(b)(2) for completed long term contracts or section 167(g) for depreciation under the income c Credit for Lederal tax paid on fuels (see instructions). d Total. Add lines 2a through 2e. 3 Subtract line 2d from line 1. If the resulf is less than \$500, do not complete or file this form. 4 Enter the tax shown on the corporation's 2004 income tax return (see instructions). Caution: If the tax is line 3 on line 5. 5 Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, cater the amount from line 3. Fastil Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation must file Form The corporation is using the adjusted seasonal installment method. 5 The corporation is using the adjusted seasonal installment method. 6 The corporation is using the adjusted seasonal installment method.	4, 52
2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1. b Look-back interest included on line 1 under section 460(b)(2) for completed long term contracts or section 167(g) for depreciation under the income c Credit for Lederal tax paid on fuels (see instructions) d Total. Add lines 2a through 2c 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. 4 Enter the tax shown on the corporation's 2004 income tax return (see instructions). Caution: If the tax is line 3 on line 5. 5 Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4. Frame Reasons for Filling — Check the boxes below that apply. If any boxes are checked, the corporation must file Form The corporation is using the adjusted seasonal installment method.	4, 52
b Cook-back interest included on line 1 under section 460(b)(2) for completed long term contracts or section 167(g) for depreciation under the income forecast method. c Credit for Lederal tax paid on fuels (see instructions). d Total. Add lines 2a through 2e. 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. 4 Enter the tax shown on the corporation's 2004 income tax return (see instructions). Caution: If the tax is line 3 on line 5. 5 Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4. 6 Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation must file Form the corporation is using the adjusted seasonal installment method.	
d Total. Add lines 2a through 2c. 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. 4 Enter the tax shown on the corporation's 2004 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from 5 Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, criter the amount from line 3. 6 The corporation is using the adjusted seasonal installment method.	
Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. I he corporation does not owe the penalty. Linter the tax shown on the corporation's 2004 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, and if it does not owe a penalty (see instructions). Reaction Reaction (see instructions).	
zero or the tax year was for less than 12 months, skip this line and enter the amount from 5 Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, cortex the amount from line 3. 6 Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation must file Form it does not owe a penalty (see instructions).	
5 Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4. Context the amount from line 3. Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation must file Form it does not owe a penalty (see instructions). The corporation is using the adjusted seasonal installment method.	4,52
Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation must life Form Fig. The corporation is using the adjusted seasonal installment method. The corporation is using the adjusted seasonal installment method.	9,43
6 The corporation is using the adjusted seasonal installment method	4,52
Last our portained to district the adjusted Seasonal Installment method	FEERN, CIV.
Light to poragon is using the annualized income installment method	
8 The corporation is a 'large corporation' figuring its first required installment based on the prior year's tax. Part III Figuring the Underpayment	
	7.77
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990 – PF filers: Use 5th month), 6th, 9th, and 12th months of the	(d)
corporation's tax year. 9 4/15/05 6/15/05 9/15/05 12	2/15/05
Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter, if none of these boxes are checked, enter 25% of line b above in each column. 10 1,131. 1,131.	7 10
1 Isstimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15	1,132
Complete lines 12 through 18 of one column before going to the next column.	
Enter amount, if any, from line 18 of the preceding column	
5 Add thes 11 and 12	
4 Add amounts on lines 16 and 17 of the proceding column	3,394
5 Subtract line 14 from line 13. If zero or loss, enter -0	0
6 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0. 16 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
7 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	ter o <u>P. Canada V. Stave</u> and Calabate.
S Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column.	1 400
to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on	1,132
A For Paperwork Reduction Act Notice, see separate instructions.	

CPCZ03121, 01/13/06

	m 2220 (2005) WORK ZONE PRODUCTS, INC.			<u></u>	76-051471	/ Fage 2
1:14	answell riguring the Penalty		·			1
		- 1	(a)	(b)	(c)	(ব)
19	Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). (Form 990-PF and Form 990-T filers; Use 5th month instead of 3rd month.)	19	3/15/06	3/15/06	2/15/06	2/21/25
20			334		3/15/06 	
21	Number of days on line 20 after 4/15/2005 and before 10/1/2005.		168	107		
22	Underpayment Number of days on line ! / X on line 21 X 6%		31.23	19.89		
23	Number of days on line 20 after 9/30/2005 and before 4/1/2006		1.66	166	2.79 166	90
24	Underpayment Number of days on line 23 x 7%	24	36.01	36.01	36.04	
25	Number of days on fine 20 after 3/31/2006 and before 7/1/2006.	25			50.04	<u> </u>
	Underpayment Number of days on line 17 X on line 25 X *%					
27	Number of days on line 20 after 6/30/2006 and before 10/1/2006.	27			7, 51	- Pristal
28	Underpayment Number of days on line 17 × on line 27 × *%	28				· · · · · · · · · · · · · · · · · · ·
29	Number of days on line 20 after 9/30/2006 and before 1/1/2007.	29	77.75	703		
	Underpayment Number of days on line 17 X on line 29 X *%.	30				
31	Number of days on line 20 after 12/31/2006 and before 2/16/2007.	37	MANUEL			
	Underpayment Number of days on line 17 × on line 31 x *%	32				
33	Add lines 22, 24, 26, 28, 30, and 32.	33	67.24	55.90	38.83	19.54
34	Penalty. Add columns (a) through (d) of line 33. Enter the ine 29; or the comparable line for other income tax return	total he	ro and on Form 1120	0, line 33; Form 112	D-A, 34	182,

^{*}For underpayments paid after March 31, 2006:For lines 26, 28, 30, and 32, use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. Those rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internal, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form 2220 (2005)

CPCZ0312L 01/13/06

Form 4562		Depreciation	and A	- 4		OMB No. 1545 0172
(Rev. January 2006)	(Depreciation : Including Informat	anu Amorti ion on Listed	Zation Propertio		2005
Department of the Treasury Informal Revenue Service Name(s) shown on return	- S	ee separato instructions		your tax reli		
WORK ZONE PRODUCT			,	your tax reit	irn.	Attachment Sequence No. 67
Business or activity to which this for	n relator					76-0514717
FORM 1120						
Part Election To	Expense Certa	in Property Under:	Section 179		////	and the same of th
1 Maximum amount. Sec	the instructions to	v = biobas limit s	re уол complete			
2 Total cost of section 1.	79 property placed	in service (see instructio fore reduction in the instruction	n businessos			\$105,000
3 Threshold cost of secti	on 179 property be	on service (see instruction fore reduction in limitation	(12) [1	*********		136,207
5 Dollar limitures of	mer 1010 (2 110)	m mie z. if zoro or less,	enter -()		T .	\$120,000
5 Dollar limitation for tax separately, see instruc	year, Subtract line	4 from line 1, if zero or	less, enter -0-, i	f married filing		·
6 Chr. Court Transcon	(a) Description of prope	erty	(b) Cost (busin	and the second of		105,000
SEE STATEMENT LO			,	ess use only)	(c) Elected cost 102,000	
7 Listed property finder ti	70 Opposited 6				102,000	
	CUOD 179 broberto	e 29 Add amounts in column		7	0	
9 Tentative deduction, Ln	ter the smaller of t	ine 5 or line 8.	(c), lines 6 and 1	7	8	102,000
18 Carryover of disallowed	deduction from line	13 of your 2004 Form 4	562	• • • • • • • • • • • • • •		102,000
					ee instrs)	105 000
13 Carryover of disallowed	doduction to mos	A did to, but do not onte	er more than line	H	12	105,000 102,000
Note: Do not use Part II or Pa	rt III below for liste	And lines 9 and 10, loss	line 12	. 🗡 13		The second second
HOUSE EXCENSES AND COME THE STREET	KIDTIAN Allania	Market A		modification to the		
14 Special allowance for ce liberty or GO Zone prop 15 Property subject to section	rtain aircraft, certai	п property with a long pr	oduction period	not include lis	ited property.) (See	instructions.)
15 Property subject to section 16 Other depreciation (inclu-	on 168(f)(1) alection	ed property) placed in \$6 o	rvice during the	fax Acat (see	instrs) 14	
16 Office depreciation fineto.	dina ACDO				15	
Ractille MACRS Depr	eciation (Do not	include listed property.)	(See instructions	;)	16	
						
 MACRS deductions for as If you are electing to groups asset accounts, check he 	lp anv assets place	//co in tax years beginnin	g before 2005.		17	56,642.
asset accounts, check he	re	The service during the ta	ax year into one	or more gene		New Property Commence
(a)	B - Assets Placed	m Bervice Dunng 2005	Tax Year Using	the General D	epreciation System	ini tirang kang ing panggan ang panggan
Classification of property	(b) Month and year placed in service	(business/myostment use	(d) Recovery period	(e) Convention	(f)	(g) Depreciation
19a 3-year properly		only — see instructions)		Convenion	Method	deduction
h 5-year property.					 	
d 10-year property.		34,207.	7 -	FIY —	200DB	A 23.7.7.
e 16 year property.						4,888.
f 20 your property						
g 25-year proporty.			—			
h Residential rental			25 yrs 27.5 yrs		S/I,	
nroperty			27.5 yrs	MM	S/L	
properly			39 yrs	MM	S/L	
Section C .	- Assets Placed in	Somice Duty post		MM		
20a Class life .		Service During 2005 Ta	K Year Using the	Alternative [Depreciation System	11
<u>b 12 year</u>	Seal of the seal o		12 yrs		<u>S/L</u>	
C 40 year			40 yrs	MM	<u>\$/L</u> 	
Part IV Summary (see in: 21 Listed property, Enter amou	structions)				(3/1/	Management of the same
22 Total. Add amounts from line 12. ii	nes 14 through the	10 - 01 - 02				16,531.
Total. Add amounts from line 12, if the appropriate lines of your return For assets shown above any	Partnerships and S cor	in and 20 m column (g), and f porations — see instructions	ine 21. Enter here an	d on	· · · · · · · · · · · · · · · · · · ·	
the portion of the basis altri	butable to continue	guring the current year,	enter		22	1.80,061
BAA For Paperwork Reduction A	Act Notice, see sep	arate instructions.	£10/7001a	L 12/29/05	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
	·		F/#Z0812	L (2/29/05	Form 4562	(2005) (Rev 1 2006)

Lorri	n 4562 (2005) (R	lev 1-2006)	WORK ZON	E PROI	DUCTS,	, INC						76-0	51.473	7	Page 2
	t V Listed	Property (Incoment, recreation	dude automob	ites, cert				lar tel	ophones, d	certain e	ompute	rs, and	property	used fo	
	Note: Fo	r any vehicle to (a) (hrough (c)	r which you ar	e using t	lhe stand ction B, a	lard mile and Sec	eago rat ition C i	e or c f appli	loducting k icable.	ease exp	oense, d	complete	e only 2	4a, 24b,	
w 20 Mar 1 100		n A – Deprecia		,		······································									· · · · · · · · · · · · · · · · · · ·
24 2	On you have evidenc					<u> </u>	X Yes	1 11	No 24b If '			1	(h)	XiYes	<u> No</u> . (i)
Тy	(a) pe of property (list vehicles first)	(b) Date placed in service	(C) Business/ mvestment use percentage	(d Cast other t	Lor	Hasis N (busine	(e) or deprecia esu/investr ise only)	ation nerv	(f) Recovery period	M	(g) elhod/ evention	Dep	recistion duction	CI sect	octod ion 179 .ost
25	Special allowance for property placed in s	or cortain aircraft, or ervice during the la	ertain property wit	th a long pr nore than 50	oduction p 0% in a qu	eriod, and valified bu	qualified siness uso	New You	ork Liberty or ustructions).	GO Zone	25				
	Property used n	nore than 50% i	in a qualified (ousiness	use:							- _F			
	00 F650	4/30/02	100-0		,646.		31,6		5.0		DBHY		1,775		
	00 F350	2/14/02	100.0		1,460.		1.5 , 8		5.0		DBHY		1,775		
	D3 MERCEDE	·	1.00.0		2,294		34,6	34.	5.0	200	DBIIY		1,775) ,	
	Proporty used 5	U% or loss in a	qualifica busi	noss uso		· · · · · · · · · · · · · · · · · · ·		·- · · · · · · · · · · · · · · · · · ·		1		Γ.		According to	omingony Arbyr Pilipak Arbary
														Complete Com	
28	Add amounts in	column (h), lin	es 25 through	27. Ente	r bere ar	id on lir	ne 21. n.	i Tabe			. 28	1	6,531		rer-dy adja Part dan
	Add amounts in							,				CARLO SANCES	Berne and the second		0.
					B - Info					**************************************	· · · · · · · · · · · · · · · · · · ·				Marian Brown and 1
Cont to yo	plete this section our employees, fir	for vehicles us	ed by a sole p questions in Se	roprietor action C	, partner to see if	, or oth you me	er 'morc et an ex	than ceptic	5% owner on to comp	,' or rela eleting ti	ated per nis secti	son. It j on for th	you prov nose veh	nded vet lictes.	rcles
	•			((a)	(1	p)		(c)	(d)	((e)	(f)
30	Total business/i during the year commuting mile	(do not include	!		icle I	Vohi	clc 2	V	ehicle 3	Vehi	icle 4	Veh	icle b	1 1	
31	Total commuting mi														
32	Total other pers miles driven												, .		
33	Lotal miles drive lines 30 through				T		ļ				1		r		r
34	Was the yehicle	available for p	ersonal use	Yes	No	Yes	No	Ye	s No	Yes	No	Yes	No	Yes	<u>No</u>
35	during off-duly t Was the vehicle than 5% owner	used primarily	by a more												
36	Is another vehicles	de available for													
· · · · · · · · · · · · · · · · · · ·			C - Question	s for Em	ployers '	Who Pr	ovide V	ehicle	s for Use I	y Their	Employ	yees			
/\nsv 5% c	vor these questions where or related	ns to determine	e if you meet a										no are m	ot more	ปาลก
37	Do you maintain by your employs		y statement th						s, includin					Yes	No
38	Do you maintain employees? See											r			
	Do you treat all														
40	Do you provide overhides, and re-	more than five v	vehicles to you	ır employ	yees, obt			from	your empl	oyoos a	bout the	ะ นรับ อโ	ฝาย		
47	Oo you moet the Note: If your an														
Pai	t VI≝ Amorti	zation												- 1-4-1-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-	منطالة الدام وحدام إبرادا
1		(a) hiption of costs			(b) mortization egins		(c) Amortizat amount	иe	c	d) ode otron	Ame per	(e) ortization mod or centage		(f) Amortizatio for this yea	n
42	Amortization of	costs that begin	ns during your	i .2005 tax F	x year (s	ee instr	uctions)	:			<u> </u>				
43	Antertization of	costs that bega	an before your	12005 tax	x year							43	1		
111		ounts in column										. 44			
			,,			1708121. 1			· · · · · · · · · · · · · · · · · · ·			Form 49	562 (200	5) (Rev	1.2006)

<u> </u>	art V Listed	Property /lin	WORK ZO	NE PRODUCT	rs, r	NC .					76	-0514	717	Pag
	Listed	nmont, recreation	on, or amuse	ment.)	ther veh	icles, ca	Hular te	elephones	s, corta	in compi	itors, a	nd prop	erty use	d for
	note; ro columns Sectio	or any vehicle fo (a) through (c) In A Deprecia	of Which you of Section A	are using the sta , all of Section L	andard r B, and S	nileage Section (rate or 3 II app	deductinį licable,	j loase	exponse	e, corrip	leto on	ly 24u, 3	⁹ 4b.
. 2	4 a Do you have eviden				Cauton	Soe th	e instri.	ictions fo	r limits	for pass	enger a	automob.	iles.)	
	(a) Type of property (list voludes first)	(b) Date placed to service	(E) Business/ investment use percentage	(d) Cost or other basis	Basi (bus	(b) s for dopn thess/inva	eciation Straent	No 24b (f) Recover	ry	g) Method/ Convention		en? (h) Depreciation deduction	. Ye	(i) Elected section 17
. 5	5 Special allowance for property placed in s	or certain arroraft, or Orvice during the te		ith a long production	n period, a	·		ork Liberty		_	.		L	cost
2	6 Properly used n	nore than 50% :	n a qualified	ith a leng production more than 50% in a fursinger use.	qualified	husinoss i	ine (sce i	instructions)	<u>) </u>	2	; <u> </u>			
2.5	JUA TOROM	11/25/03	100.0	37,001	T -	25,	T roo		<u>I</u>					
	002 F-150	6/18/03	100.0	15,169			584.	5.0 5.0) <u>0DB</u> H		3,25		
	003 F-250	4/17/03	1.00.0	20 200		21,		5.0		00DB II		1,45		
Z	Property used 50	1% or less in a	qualified bus	iness use:	·		<u>,,,,,</u>			<u>) OT) II (TO)</u>	4.	3,25	0.1	·
•		·											145 years	ri arythia da
28		column (h), fino	s 25 through	27. Entar here :	and on i	 ina 21 .						116		and thinks
29	Add amounts in o	column (i), line	26. Enter hor	e and on line 7.	nage i Lapage i	HE Z∏, β	າສຽ6 ເ	• • • • • • • • •		28				
	and out the same		,	Section B - Inf	formatic	n on Us	e of Ve	chicles	1, , , , ,				29	
ιу	nplote this section i our employees, firs	for vehicles use I answer the or	d by a sole p						r, or re	ilated ne	rsan. T	f vau ne	vidat u	سينمنطه
	our employees, firs	ISWEL INE GE	rewillous in 26	Τ	f you me	etan o	xceptio	n to com	pleting	this sect	ion for	those ve	hicles.	CHROISE
30	Total business/jn during the year (a commuting miles	Vestment miles	driven	(a) Vehicle 1) :	(b) iiolo 2		(c) hicle 3		(d) nicle 4		(e) hicle 5	T -	(f) hicle 6
31	Lotal commuting mile		year						<u> </u>				`	
32	Total other porson miles driven	nat (noncommu	ting)		 									
3.3	Total miles driven lines 30 through 3	during the yea	r. Add										 	
				Yes No	Yes	No	Yes	No	Yes	N-		1 44		
	Was the vehicle are during off duty hor	urs7						110	I CS	No.	Yes	No_	Yes	No
	Was the vehicle un than 5% owner or	related person?	/ a more ?					 						
G 	is another vehicle personal use?	<u> </u>												
	al.	Section C	- Questions	for Employers V	Vho Pro	vide Ve	hicles	or Use b	v Their	Employ	Adv.			<u> </u>
	er these questions where or related po	usons (see insh	ructions),	exception to col	mpleting) Sactio	□ B for	vehicles	used by	/ employ	ees wh	o are n	of more	than
7	Do you maintain a by your employees	written policy si	tatoment that	prohibits all per	rsonal u	se of ve	hiclas,	including	comm	uling,			Yes	No
3 (Do you maintain a employees? See th Do you treat all use	written policy st o instructions fo	latement that or vehicles us	prohibits person	naliuso.	of vehicl	es, axa	ept com						
		or ministers the	embiolaea si	s personal usa?										
)	⊅o you provide mod vohicles, and retain	e than five vehi the information	icles to your	employecs, obta	iri infor	aation (rom yo	ur employ	/ees ພຽ	out the r	se of t	he	· j	
١	Note: // your answe	quiremonts conc or lo 37, 38, 39,	rings promited as the contract for	c:				ee instruc	ctions)	• • • • • • • • • • • • • • • • • • • •	• • • • • •			
Ħ	VI Amortizat	ion						3 4076/66	Vernon	#5.		f.		
	(a Descripto	a) Dustamente		(p)		(c)	·	(d)		(e				
. ,				Date amoutization begins		nortizable amount		Code soctio	<u>.</u>	Anterfic Perior Perior	ration for		(f) nortization this year	
F	mortization of cost	5 that begins do	u <u>ring your 20</u>	0 <u>5 tax year (see</u>	instruc	tions):				1				
					·					+				
- /-	mortization of cos	ts that began be	etoro your 20	05 tax year			·			<u> </u>	12	<u>-</u>		
	otal. Add amounts	in column (f). S	See instruction	ins for where to	report.				• • • • • •		43		W.A	
				FD170	8121, 12/25	7/05				<u> </u>		2 (2005)		

entern	d Property (In	clude automot	IE PRODUCT	Der Vohioloo				-	76	-0514	717	P
Note:	ed Property (In ainmont, recreation for any vehicle of	on, or amusem	ent.)	Get Attribles, Ce	muar tei	ephones	s, certa	in comp	uters, a	nd prope	erty use	d for
Colum	For any vehicle fo ns (a) through (c) tion A — Deprecia	of Section A,	e using the sta all of Section E	andard mileago 3, and Section (tate or d Dif aboli	leducting cable) lease	oxpensi	e, comp	lete on!	y 24a, ;	24b,
Sect	tion A - Deprecia ence to support the bu	tion and Othe	r Information ((Caution: See th	e instruc	tions for	· Ilmits	fac none			.,	
24 a Do you have cyide (a)	(b)		use claimed?		s N	lo 24h	lf 'Yes,' i	s the evide	nce wille	oz oz	/	
Type of property (5st vehicles first)	Date placed in service	(C) Business/ Investment use percentage	(d) Cost or other basis	(e) Banis for deprication (business/investigation)	eciation etment	(f) Recovai Period	v	(g) Method/ Couvertion	6	(h)	Ye	(i) Electrical
25 Special allowance property placed in 26 Property used	tor certain aircraft, ce service during the tax more than 50% i	ortain property will	na long production ore than 50% in a			k Liberty	1	ne T	+		Al-	cos
2003 F550	more than 50% in 2/20/03	n a qualified b	usiness use:		_		····	2				
	1		<u>37,003</u>	29,	043.	<u>5.</u> C	20	00DB <u>H</u>	<u>Y</u>	3,25	50.	
27 Property used	50% or less in a c	t qualified busin	ess use:	<u> </u>					<u> </u>			
				T			· 		<u> </u>		PARAMETER.	- Nouve
	 								+ -			
28 Add amounts in	J Column (b) Jian			. (·			
29 Add amounts in	r column (h), lines	r 20 (firough 2 26. Enter here	/. I oter here a	ind on line 21, p	рядо 1			28	-			ela es
	column (i), line 2	S. T.Mei Meio	ection R = Int	page 1 ormation on Us					* * * * * * * *	2	a	
Official this section	Mar valuates		min	ការពេលពេក បារ ប៉ុន្ម	c or Act	icles						
omplete this section your employees, fil	rst answer the qui	estions in Sec	lion C to see if	you moet an e	e utan pr xechtion	% owner to come	, or re Jetina i	lated pe Bio cost	rsan, If	you pro	vided v	ehicle
0 Total business#	Durastronest miss.		(a)	(b)		:)		(d)	100 101 1	nose vei	nicles.	
during the year commuting mile	LOO MAY USAL OUS	7,140	Vehicle_1	Vehicle ≥		ole 3		ide 4		(e) idle 5		(f)
1 Total commuting and	les driven during the y								V (21)	<u> 1010 13 </u>	· ·	ii <u>che</u> G
 Total other personal nules driven. 	onal (noncommuti	ing)									ļ	
9 Total miles drive tines 30 through	n during the year 32	- Add			<u>-</u>							
Was the vehicle :	available for		Yes No	Yes No	Yes	No	Yes	No	Yes	No	Yes	64.0
against oustiffs th	Oursi					,			- '		103	Sic
than 5% owner o	r related person?	a more					·					}
Is another vehicle personal use?	a available for	-										
,	Section C	Questions to	r Employee M	/ho Provide Vel								
wer these questions owners or related p	s to determine if y persons (see instri	/Ou meet an ex	contion to con	no Provide Vel opieting Section	nicles for 1 B for vo	r Use by chicles d	Their sed by	Employ	oes who		4	
Do you maintain a	i written policy sta	tionsent that o	eabilata ett				 •	— -—			Yes	No
DV VOUE employees	and the second			sonal use of vel							. 105	
Do you maintain -	i written policy sta			estronomica de la composición de								
Do you maintain a employees? See t	he instructions to be of vehicles by a	tement that p	rohibits persona	al use of vehicle officers, directo	os, excep rs. or 1%	ot comm	iuling, e owne	by your ≅rs			1	
Do you maintain a employees? See t Do you treat all us Do you provide movehicles, and retain	ic of vehicles by o are than five vehic in the information	itement that pur vehicles used omployees as parties to your en-	robibits persona f by corporate o personal use? pployees, obtain	n information fr	OITI VOUL	emplov	e owne	vis		.		
Do you maintain a employees? See to Do you treat all us Do you provide more vehicles, and retain Do you meet the re-	or of vehicles by one than five vehicle than five vehicle the information	itement that pur vehicles used omployees as purpleyees as pure of des to your en receivor?	rohibits persona f by corporate o personal use? nployees, obtain	n information fr	om your	employ	e owne	oul the u				
Do you maintain a employees? See to complete the complete	ie of valuates by a pre-than five vehic in the information aguirements conci er to 37, 38, 39, 4	itement that pur vehicles used omployees as purpleyees as pure of des to your en receivor?	rohibits persona f by corporate o personal use? nployees, obtain	n information fr	om your	employ	e owne	oul the u				Maria Maria
Do you maintain a employees? See to Do you freat all us Do you provide movehicles, and retain Do you meet the re Note: If your answ.	ie of valuates by a pre-than five vehic in the information aguirements conci er to 37, 38, 39, 4	itement that pur vehicles used omployees as purpleyees as pure of des to your en receivor?	rohibits persons f by corporate of personal use? inployees, obtain d automobile de s," do not com	n information fr omonstration us plete Section B	om your	employ	e owne	oul the u				
Do you maintain a employees? See to Do you treat all us Do you provide movehicles, and retain Do you meet the re Note: If your answ. Amortiza	or volucies by core than five vehicle than five vehicle the information requirements conceed to 37, 38, 39, 4 tion (a) on of costs	stement that provential provential transfer of the complex as the comple	rohibits personal dispersonal use? opersonal use? opersonal use? oployees, obtain dispersonal disperso	n information fr crnonstration us pleta Section B (c) Amerizable smount	om your	employ	e owne es abo ions) . vehicle	Out the u	se of the	Ame	(f) ortization	Maria Maria
Do you maintain a employees? See to Do you treat all us Do you provide movehicles, and retain Do you meet the re Note: If your answ. Amortiza	or volucies by core than five vehicle than five vehicle the information requirements conceed to 37, 38, 39, 4 tion (a) on of costs	stement that provential provential transfer of the complex as the comple	rohibits personal dispersonal use? opersonal use? opersonal use? oployees, obtain dispersonal disperso	n information fr crnonstration us pleta Section B (c) Amerizable smount	om your	employe instruct covered (d)	e owne es abo ions) . vehicle	out the u	se of the	Ame	<u>(f)</u>	
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## Sequence No. 27 Sequence No. 27 Sequence No. 20 (sequence not necessary) 1993 B or 1099 S	Internal Revenue Service (99) Name(s) shown on return	Under Sections 179	ess Prope s and Recaptur and 280F(b)(2) see separate	e Amounts		2005
1 Lister the gross procueses know subset or exchanges reported to your or 2005 on Form(s) 1099-8 or 1099-8 Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Of Than Casualty or Ther Most Property Held More Than 1 Year (see instructions) (a) Describer (b) Describer (b) Describer (conductors) (conductors) (d) Consultations and Involuntary Conversions From Of Describer (d) De		1/3				sequence No. 27
Than Casualty or Theft — Most Property Held More Than 1 Year (see instructions) 2 (a) Description (b) Date Academ (country Held More Than 1 Year (see instructions) 2 (a) Description (b) Date Academ (country Held More Than 1 Year (see instructions) 3 (Gain, if any, time Form 4684, line 42. 4 Section 1231 gain or (fines) from file-kind exchanges from 1 orm 8524. 5 Section 1231 gain or (fines) from file-kind exchanges from 1 orm 8524. 6 Cain, if any, time Form 4684, line 42. 5 Section 1231 gain or (fines) from file-kind exchanges from 1 orm 8524. 6 Cain, if any, from files 2 through 6. Enter the gain or (fices) here and on the appropriate fine as follows. 7 Combine files 2 through 6. Enter the gain or (fices) here and on the appropriate fine as follows. 8 Partnerships (seeper letting large partnerships) and 8 serpportions. Report the gain or (fices) files 8, 9, 11, 31 and 1 files 11 files 8, 9, 11, 31 and 1 files 11 files 8, 9, 11, 31 and 1 files 11 file	1 Linter the gross programs	S AND DAY IN THE REAL PROPERTY OF THE PARTY			26-05-7215	7
Than Casualty or Theft — Most Property Held More Than 1 Year (see instructions) 2 (a) Description (b) Date Academ (country Held More Than 1 Year (see instructions) 2 (a) Description (b) Date Academ (country Held More Than 1 Year (see instructions) 3 (Gain, if any, time Form 4684, line 42. 4 Section 1231 gain or (fines) from file-kind exchanges from 1 orm 8524. 5 Section 1231 gain or (fines) from file-kind exchanges from 1 orm 8524. 6 Cain, if any, time Form 4684, line 42. 5 Section 1231 gain or (fines) from file-kind exchanges from 1 orm 8524. 6 Cain, if any, from files 2 through 6. Enter the gain or (fices) here and on the appropriate fine as follows. 7 Combine files 2 through 6. Enter the gain or (fices) here and on the appropriate fine as follows. 8 Partnerships (seeper letting large partnerships) and 8 serpportions. Report the gain or (fices) files 8, 9, 11, 31 and 1 files 11 files 8, 9, 11, 31 and 1 files 11 files 8, 9, 11, 31 and 1 files 11 file	(or substitute statement) that you ar	e including on line 2, 10, or 20 (so	2005 on Form(:	<) 1099-B or 1099-	s	
(a) Date setting of purposes. SEE SYATEMENT 11 3 Gain, if any, from Form 4884, line 42. 4 Geolian 1231 gain or (loss) from lise, shire and setting						
SPE_STATEMENT_11 (b) Durk expand (c) Das said conditions of such that years (d) Course of the place of the past, plan to go the past, p	2	- Most Property Held Mo	re Than 1 Yo	ear (see instru	ry Conversio	ons From Oth
SFE STATEMENT 11 3 Gain, if any, from Form 4684, line 42. 4 Bection 1231 gain from installment sales from 1 orm 6259, line 26 or 37. 5 Snottin 1231 gain or (loss) from like-kind exchanges from 1 orm 6259, line 26 or 37. 6 Gain, if any, from line 3, from other than ossuelly or theft. 7 Combine lives 2 transpir 0, Enter the gain or (loss) between an assuelly or theft. 8 Snottin 1231 gain or (loss) from like-kind exchanges from 1 orm 6824. 9 Subtracting for form 1055, Schedule Ki, line 9 here and on the appropriate line as follows instructions for form 1055, Schedule Ki, line 9 here and on the appropriate line as follows instructions for form 1055, Schedule Ki, line 9 here and 1205, Schedule Ki, line 9 here and skip lines 8 and 9. If line 7 is a gen and value line 7 is store and skip lines 8 and 9. If line 7 is a gen and value line 7 is store and skip lines 8 and 9. If line 7 is a gen and value line 7 is store and skip lines 8 and 9. If line 7 is a gen and value line 7 is store and skip lines 8 and 9. If line 7 is a gen and value line 7 is store and skip lines 8 and 9. If line 7 is a gen and value line 7 is store and skip lines 8 and 9. If line 7 is a gen from line 7 is a line gen from line 7 in store and skip lines 8 and 9. If line 7 is a gen from line 7 in store and skip lines 8 and 9. If line 7 is a gen from line 7 in store and skip lines 8 and 9. If line 7 is a gen from line 7 in store and skip lines 8 and 9. If line 7 is a gen from line 7 in store and skip lines 8 and 9. If line 7 is a gen from line 7 in sa a line gen from line 7 in sa gen from line 7 in sa line gen from line 8 in sa line gen from line 8 in sa line gen from	(4) Desamblian	(b) Date acquired (c) o		(e) Depreciation		
3 Gain, if any, from Form 4694, line 42. 4 Section 1231 gain from installment sales from 1 orm 6252, line 25 or 37. 5 Section 1231 gain ar (loss) from like-kind exchanges from 1 orm 824. 4 Gain, if any, from line 32, from other than assuraby or theft. 5 Section 1231 gain ar (loss) from like-kind exchanges from 1 orm 824. 4 Canin, if any, from line 32, from other than assuraby or theft. 5 Combine lines 2 transing 16, Enter the gain or (loss) have and on the appropriate line as follows: 6 Partherships (except electing large partnerships) and 3 comportations from the 9. Skipt lines 9, 9, 11, and 6 Individuals, partners, 5 corporation shareholders, and all others if line 7 is zorn or a loss, enter the amount from lines 10 blow and skip lines 8 and 9. If line 7 is a gent part you did not have any prior year section 1231 losses from the 1231 losses from prior years (see instructions for the year exception 1231 losses from prior years (see instructions). 8 Nonreaportural not section 1231 losses from prior years (see instructions). 9 Subtract line 8 from line 7. If Jeno or loss, prior 30, 11, and 11,	.,	(month, day, year) (month, day, year)		allowed or allowable since	Dania, plus	(d) Gain or day
3 Giain, if any, from Form 4884, line 42 3 Section 1231 gain of ross) from like-kind exchanges from 1 om 822 and 3 and 4 and 4 and 5 section 1231 gain or (loss) from like-kind exchanges from 1 om 822 and 6 Gain, if any, from line 32, from other than casualty or that. 5 Section 1231 gain or (loss) from like-kind exchanges from 1 om 822 and 6 Gain, if any, from line 32, from other than casualty or that. 5 Combine fluxe 2 through 6, Enter the gain or (loss) here and on the appropriate line as follows: 1 Detail 1 on 1 of 1056, Schadulo K, lime 10, or if orm 11208, Schadulo K, lime 3 stuplines 3, 11, and individuals, partners, 5 corporation shareholders, and all others if line 7 is zero or a loss, enter the amount from losses, or they were (coaptured in an earlier your, enter the gain and they any prior year section 1231 schadulo F fled with your return and skip lines 8 and 9. It line 7 is a gun and you did not have any prior year section 1231 schadulo F fled with your return and skip lines 8, 3, 11, and 17 below. 7 Nonrecoptured not section 1231 losses from prior years (see instructions). 8 Subtract line 8 from line 7. If year or less, enter -0. If line 9 is zero, enter the gain from line 7 on time 12 below. If line 9 is zero, enter the gain from line 7 on time 12 below. If line 9 is zero, enter the gain from line 7 on time 12 below. If line 9 is zero, enter the gain from line 7 on time 12 below. If line 9 is zero, enter the gain from line 7 on time 12 below. If line 9 is zero, enter the gain from line 7 on time 12 below. If line 9 is zero, enter the gain from line 7 on time 12 below. If line 9 is zero, enter the gain from line 7 on time 12 below. If line 9 is zero, enter the gain from line 7 on time 12 below. If line 9 is zero, enter the gain from line 7 on time 12 line 9 is zero, enter the gain from line 7 on time 12 line 9 is zero, enter the gain from line 7 on time 12 line 9 is zero, enter the gain from line 7 on time 12 line 9 is zero, enter the gain from line 1 line 12 line 12 line 12 line 12 line 12 li	SEE STATEMENT 11	+		acquisition	exponse of sale	i Doe (b) lo mus.
3 Gain, if any, from Form 4684, line 42 4 Section 1231 gain or (loss) from fike-kind exchanges from 1 orm 8824 6 Cash, if any, from line 32, from other than casualty or that. 7 Combine fixes 2 through 6, Enter the gain or (loss) here and on the appropriate line as follows: 8 Partnerships (except decting large permerships) and 5 corporations/tenot the gain or (loss) following the 17 partnerships and 5 corporations/tenot the gain or (loss) following the 18 partnerships (except decting large permerships) and 5 corporations/tenot the gain or (loss) following the 18 partnerships (except decting large permerships) and 5 corporations/tenot the gain or (loss) following the 18 partnerships (except decting large permerships) and 5 corporations/tenot the gain or (loss) following the 18 partnerships (except decting large permerships) and 5 corporations/tenot the gain or (loss) following the 18 partnerships (except decting large permerships) and 5 corporations/tenot the gain or (loss) following the 18 partnerships (except decting large permerships) and 5 corporations/tenot files (except decting large permerships) and 5 corporations files (except decting large permerships and 9 the files (except decting large permerships) and 5 corporations files (except decting large permerships) and 5 corporations files (except large permer					T	-
5 Section 1231 gain or (loss) from like-kind exchanges from Lorm 824 or 37. 6 Gain, if any, from line 32, from other than casualty or theft. 7 Combine lines 2 through 6, Enter the gain or (loss) here and on the appropriate line as (ollows, natructions for lorm 1055, Schedule K, line 10, or form 11205, Schedule K, line 9, Skip lines 8, 9, 11, and Individuals, partners, in schedule K, line 10, or form 11205, Schedule K, line 9, Skip lines 8, 9, 11, and Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from losses, or they were creatured in an earlier your enter flag and skip lines 8 and 9. If line 7 is a guin and you did not have any prior year section 1231 schedule 0 flight with your return and skip lines 8, 11, and 12 below. 8 Novecaptured not section 1231 losses from prior years (see instructions) 9 Subtract line 8 from line 7. If zero or less, enter -0. If line 9 is zero enter the gain from line 7 on line 12 below. If line 9 is zero, enter the gain may line 7 on line 12 below. If line 9 is zero, enter the gain from line 9 as a long-term cantel gain on the Schedule D fled with your return (see instructions) 9 Subtract line 8 from line 7. If zero or less, enter -0. If line 9 is zero, enter the gain from line 9 as a long-term cantel gain on the Schedule D fled with your return (see instructions) 9 Subtract line 8 from line 7. If zero or less, enter -0. If line 9 is zero, enter the gain from line 9 as a line 9 is below. If line 9 is zero, enter the gain from line 9 as a line 9 is proved the gain from line 9 as a line 9 is placed to the line 9 is zero entered to the line 9 in the 9 in						
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6 Gain, if any, from line 32, from other than easuably or theft. Combine lines 22 through 6, Enter the gain or (loss) here and on the appropriate line as follows. Partnerships (except electing large partnerships) and \$ corporations/report the gain or (loss) following the instructions for 1 cm. 1055, Schedule K, line 10, or 1 cm. 11205, Schedule K, line 9. Skip lines 8, 9, 11, and Individuals, partners, \$ corporation shareholders, and all others if line 7 is zero or a loss, enter the amount from losses, or this 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 schedule D filed with your return and skip lines 8, 9, 11, and 17 below. Nonrecoptium of section 1231 losses from prior years (see instructions). 9 Subtract line 8 from line 7. If zero or less, enter -0. If line 9 is zero after the gain from line 7 on line 12 below. If line 9 is more lian zero, entor the amount from line 8 on line 12 below and enter the gain from line 9 as a schedule D filed with your return (see instructions). 9 Subtract line 8 from line 7. If zero or less, enter -0. If line 9 is zero after the gain from line 7 on line 12 below. If line 9 is more lian zero, entor the amount from line 8 on line 12 below and enter the gain from line 9 as a 9. Ordinary gains and Losses not included on lines 11 through 16 (include property hold 1 year or less): 10 Definition of the second lines 34 and 41a. 11	4 Section 1231 gain from installment is	iles from Lorm 6252 line 25 37			3	·
7 Combine lines 2 through 6, Enter the gain or (loss) here and on the appropriate line as follows 7 — 35 Partnerships (except electing large partnerships) and 5 corporations. Zenori the gain or (loss) following the 12 below instructions for form 1065. Schadulo K, line 10, or form 1120s, Schadule K, line 8. Skip lines 8, 9, 11, and 1120s, Schadule K, line 8. Skip lines 8, 9, 11, and 1120s, Schadule K, line 9. Skip lines 8, 9, 11, and 1120s, Schadule K, line 9. Skip lines 8, 9, 11, and 1120s, Schadule K, line 9 is skip lines 8, and 9. If line 7 is a gain and you did not have any prior year section 1231 losses from prior years (see instructions). 8 Nonreceptured not section 1231 losses from prior years (see instructions). 9 Subtract line 8 from line 7. If zero or less, enter -0. If line 9 is zero, enter the gain from line 7 on fine 12 below. If line 9 is more than zero, entor the amount from line 8 on line 12 below and enter the gain from line 9 as a set line 9 is more than zero, entor the amount from line 8 on line 12 below and enter the gain from line 9 as a set line 9 is more than zero, entor the amount from line 8 on line 12 below and enter the gain from line 9 as a set line 9 is more than zero, entor the amount from line 8 on line 12 below and enter the gain from line 9 as a set line 9 is more than zero, entor the amount from line 8 on line 12 below and enter the gain from line 9 as a set line 9 is more than zero, entor the amount from line 8 in line 12 below and enter the gain from line 9 as a set line 9 is more than zero, entor the amount from line 8 in line 1 line 10 line 10 line 1 line 10 li	Section 1231 gain or (loss) from like-J	kind exchanges from Loron 8824	**** - • • • • • • • •		4	
Instructions for Corn 1055, Schedule K, line 10, or Form 11205, Schedule K, line 9. Skip lines 8, 9, 11, and 17 below. Individuals, partners, S corporation shareholders, and all others if line 7 is zero or a loss, enter the amount from lines 2 on line 11 below and skip lines 8 and 9. If line 7 is a girn and you did not have any prior year section 1231 schedule D filed with your return and skip lines 8, 9, 11, and 17 below. 8 Nonrecoptured not section 1231 losses from prior years (see instructions). 9 Subtract line 8 from line 7. If zero or less, enter .0. If line 9 is zero, enter the gain from line 7 as a long-term capital gain on the line 9 is more than zero, entor the amount from line 8 on line 12 below and enter the gain from line 12 below. If line prismantal gain on the Schedule D filed with your return (see instructions). 9 Subtract line 8 from line 7. If zero or less, enter .0. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 2 is more than zero, entor the amount from line 8 on line 12 below and enter the gain from line 12 below. If line prismantal gain on the Schedule D filed with your return (see instructions). 9 Ordinary Gains and Losses (see Instructions). 10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 10 Ordinary gain from line 7 or amount from line 8, if applicable. 11	Gain, if any, from line 32, from other i	than casualty or theff				
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into 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nourecoptured not section 1231 losses from prior years (see instructions). 8 Subtact line 8 from line 7. If zero or less, enter -0. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a 3 line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a 3 line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a 3 line 12 below. If line 9 is a prior extended to line 12 below. If line 9 is a prior line 7 on line 12 below. If line 9 is a prior line 7 on line 12 below. If line 9 is a prior line 7 on line 12 below. If line 9 is a prior line 9 is a 2 is a 3 line 12 below. If line 9 is a 2 is a 3 line 12 below. If line 13 is a 3 line 12 below. If line 13 line 13 line 14 line 14 line 15 li	instructions for Form 1065, Scheduly I	artnerships) and S corporations R	ropriato line as eport the dain /	follows	7	-35
ine 7 on line 11 below and skin lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 schedule D fillow was not skin lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 schedule D fillow with your return and skip lines 8, 9, 11, and 12 below. 8 Nourecaptured not section 1231 losses from prior years (sce instructions). 9 Subtract line 8 from line 7. If zero or less, enter -0. If line 9 is part, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 7 on line 12 below. If line 19 is zero, enter the gain from line 7 on line 12 below. If line 19 is zero, enter the gain from line 7 on line 12 below. If line 19 is zero, enter the gain from line 7 on line 12 below. If line 19 is zero, enter the gain from line 7 on line 12 below. If line 19 is zero, enter the gain from line 7 on line 1 line lines 10 lines 1 lines at lines 11 lines 1 lines 2 lines 2 or 3 or	12 Delaw.	Stime 10, of Form 1120S, Schedu	le K, lino 9. ski	n (1055) lollowing (p lines 8, 9, 11, an	he Bayes	
Loss, if any, from line / Gain, if any, from line 7 or amount from line 8, if applicable. 11 -357. Gain, if any, from line 3 12 Net gain or (loss) from Form 4684, lines 34 and 41a. Ordinary gain from installment sales from Form 6252, line 25 or 36 Ordinary gain or (loss) from like-kind exchanges from Form 8824 Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines at and b below. For individual returns, complete lines a and b below: If the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), onter that part of the loss berd. Enter from properly used as an employed on Schedule A (Form 1040), line 27, and the part of the loss Sec. Enter from properly used as an employed on Schedule A (Form 1040), line 27, and the part of the loss Sec. Enter from properly used as an employed on Schedule A (Form 1040), line 27, and the part of the loss Sec. Enter from properly used as an employed on Schedule A (Form 1040), line 27, and the part of the loss Sec. Enter from properly used as an employed on Schedule A (Form 1040), line 27, and the part of the loss Sec. Enter from properly used as an employed on Schedule A (Form 1040), line 28, Identify as from Form 4797, line 18a.	Schodule Diffled with your ration and	enter year, enter the gain from lin	P 7 OF a long to	Ty prior year section	n 1231	
Loss, if any, from line / Gain, if any, from line 7 or amount from line 8, if applicable. 11 -357. Gain, if any, from line 3 12 Net gain or (loss) from Form 4684, lines 34 and 41a. Ordinary gain from installment sales from Form 6252, line 25 or 36 Ordinary gain or (loss) from like-kind exchanges from Form 8824 Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines at and b below. For individual returns, complete lines a and b below: If the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), onter that part of the loss berd. Enter from properly used as an employed on Schedule A (Form 1040), line 27, and the part of the loss Sec. Enter from properly used as an employed on Schedule A (Form 1040), line 27, and the part of the loss Sec. Enter from properly used as an employed on Schedule A (Form 1040), line 27, and the part of the loss Sec. Enter from properly used as an employed on Schedule A (Form 1040), line 27, and the part of the loss Sec. Enter from properly used as an employed on Schedule A (Form 1040), line 27, and the part of the loss Sec. Enter from properly used as an employed on Schedule A (Form 1040), line 28, Identify as from Form 4797, line 18a.	9 Subtract line 8 from line 7. If zero or letting 9 is more than zero, entire the amolong term cantal gain on their the amolong.	as, enter -0 If line 9 is zero, ente	le e :		the Common	
Loss, if any, from line 7. Gain, if any, from line 7 or amount from line 8, if applicable. Gain, if any, from line 31. Net gain or (loss) from Form 4684, lines 34 and 41a. Ordinary gain from installment sales from Form 6262, line 25 or 36. Ordinary gain or (loss) from like-kind exchanges from Form 8824. Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines and b below. For individual returns, complete lines a and b below: If the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from property used as an employed on Schedule A (Form 1040), line 27, and the part of the loss See instructions. Condenses the loss from income-producing property on Schedule A (Form 1040), line 27, and the part of the loss See instructions.	9 Subtract line 8 from line 7. If zero or le line 9 is more than zero, enter the amelong term capital gain on the Schedule	ss, enter -û If line 9 is zero, ente unt from line 8 on line 12 below ar D filed with your return (see instru	r the gain from ad enter the gai ctions)	line 7 on fine 12 b n from line 9 as a	the Common	
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Gain, if any, from line 31 Net gain or (loss) from Form 4684, lines 34 and 41a. Ordinary gain from installment sales from Form 6252, line 25 or 36 Ordinary gain or (loss) from like-kind exchanges from Form 8824 Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines if the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from property used as an employee on Schedule A (Form 1040), line 27, and the part of the loss See instructions.	9 Subtract line 8 from line 7. If zero or le line 9 is more than zero, enter the amelong term capital gain on the Schedule	ss, enter -û If line 9 is zero, ente unt from line 8 on line 12 below ar D filed with your return (see instru	r the gain from ad enter the gai ctions)	line 7 on fine 12 b n from line 9 as a	the Common	
Gain, if any, from line 31 Net gain or (loss) from Form 4684, lines 34 and 41a. Ordinary gain from installment sales from Form 6252, line 25 or 36 Ordinary gain or (loss) from like-kind exchanges from Form 8824 Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines if the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from property used as an employee on Schedule A (Form 1040), line 27, and the part of the loss See instructions.	9 Subtract line 8 from line 7. If zero or le line 9 is more than zero, enter the amelong term capital gain on the Schedule	ss, enter -û If line 9 is zero, ente unt from line 8 on line 12 below ar D filed with your return (see instru	r the gain from ad enter the gai ctions)	line 7 on fine 12 b n from line 9 as a	the Common	
Gain, if any, from line 31 Net gain or (loss) from Form 4684, lines 34 and 41a. Ordinary gain from installment sales from Form 6252, line 25 or 36 Ordinary gain or (loss) from like-kind exchanges from Form 8824 Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines if the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from property used as an employee on Schedule A (Form 1040), line 27, and the part of the loss See instructions.	9 Subtract line 8 from line 7. If zero or le line 9 is more than zero, enter the amo long term capital gain on the Schedule	ss, enter -û If line 9 is zero, ente unt from line 8 on line 12 below ar D filed with your return (see instru	r the gain from ad enter the gai ctions)	line 7 on fine 12 b n from line 9 as a	the Common	
Gain, if any, from line 3.1 Net gain or (loss) from Form 4684, lines 34 and 41a. Ordinary gain from installment sales from Form 6252, line 25 or 36. Ordinary gain or (loss) from like-kind exchanges from Form 8824. Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines. If the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from property used as an employee on Schedule A (Form 1040), line 27, and the part of the loss. See instructions.	9 Subtract line 8 from line 7. If zero or let line 9 is more than zero, enter the amo long term capital gain on the Schedule artific Ordinary Gains and Loss or Ordinary gains and losses not included	as, enter -0 If line 9 is zero, ente unt from line 8 on line 12 below at D filed with your return (see instru es (see instructions) on lines 11 through 16 (include pro	r the gain from nd enter the gai ctions)	line 7 on fine 12 b n from line 9 as a	the Common	
Net gain or (loss) from Form 4684, lines 34 and 41a. Ordinary gain from installment sales from Form 6252, line 25 or 36. Ordinary gain or (loss) from like-kind exchanges from Form 8824. Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines at and 5 below. For individual returns, complete lines a and 5 below: If the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from properly used as an employee on Schedule A (Form 1040), line 27, and the part of the loss. See instructions	9 Subtract line 8 from line 7. If zero or let line 9 is more than zero, enter the amolong term capital gain on the Schedule artific Ordinary Gains and Loss 1 Ordinary gains and losses not included	as, enter -0 If line 9 is zero, ente unt from line 8 on line 12 below ar D filed with your return (see instru es (see instructions) on lines 11 through 16 (include pro	r the gain from nd enter the gai ctions)	line 7 on line 12 b. n from line 9 as a ear or less):	the Common	
Ordinary gain from installment sales from Form 6252, line 25 or 36 Ordinary gain or (loss) from like-kind exchanges from Form 8824 Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines if the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from property used as an employee on Schedule A (Form 1040), line 27, and the part of the loss See instructions.	9 Subtract line 8 from line 7. If zero or let line 9 is more than zero, enter the amolong term capital gain on the Schedule art. Ordinary Gains and Loss Ordinary gains and losses not included loss, if any, from line 7.	as, enter -0 If line 9 is zero, ente unt from line 8 on line 12 below at D filed with your return (see instru es (see instructions) on lines 11 through 16 (include pro	r the gain from nd enter the gai ctions)	line 7 on line 12 b. n from line 9 as a ear or less):	elow. If	-257
Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines if the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from property used as an employee on Schedule A (Form 1040), line 27, and the part of the loss See instructions.	9 Subtract line 8 from line 7. If zero or let line 9 is more than zero, enter the amolong term capital gain on the Schedule art. Ordinary Gains and Loss Ordinary gains and losses not included Loss, if any, from line 7 or amount from Gain, if any, from line 7 or amount from Gain, if any, from line 7.	as, enter -0 If line 9 is zero, ente unt from line 8 on line 12 below at 0 filed with your return (see instructions) on lines 11 through 16 (include profiled by 15 cm lines 11 through 16 (include profiled by 15 cm lines 8, if applicable	r the gain from nd enter the gai ctions)	line 7 on line 12 b n from line 9 as a	elow. If 9	-357.
Combine lines 10 through 16. For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines if the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from property used as an employee on Schedule A (Form 1040), line 27, and the part of the loss See instructions.	9 Subtract line 8 from line 7. If zero or let line 9 is more than zero, enter the amolong term capital gain on the Schedule art. Ordinary Gains and Loss Ordinary gains and losses not included Loss, if any, from line 7. Gain, if any, from line 7 or amount from Gain, if any, from line 31. Net gain or (loss) from Form 4604 if	as, enter -0 If line 9 is zero, enter unt from line 8 on line 12 below at 0 filed with your return (see instructions) es (see instructions) on lines 11 through 16 (include pro-	r the gain from nd enter the gai ctions)	line 7 on line 12 b n from line 9 as a	elow. If 9	-357.
For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines and b below. For individual returns, complete lines a and b below: If the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from property used as an employee on Schedule A (Form 1040), line 27, and the part of the loss See instructions.	9 Subtract line 8 from line 7. If zero or lettine 9 is more than zero, enter the amolong term capital gain on the Schedule 1 Ordinary Gains and Loss Ordinary gains and losses not included Loss, if any, from line 7. Gain, if any, from line 7 or amount from Gain, if any, from line 31. Net gain or (loss) from Form 4684, lines. Ordinary gain from installment as in the form.	as, enter -0 If line 9 is zero, enter unt from line 8 on line 12 below at D filed with your roturn (see instructions) on lines 11 through 16 (include profile 8, if applicable. 34 and 41a.	r the gain from id enter the gai etions)	line 7 on line 12 b n from lino 9 as a	9 elow. If 9 11 12 13	-257
For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below: If the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss from income-producing property on Schedule A (Form 1040), line 27, and the part of the loss See instructions. Postetowns the	9 Subtract line 8 from line 7. If zero or lettine 9 is more than zero, enter the amotong term capital gain on the Schedule 1 Ordinary Gains and Loss Ordinary gains and losses not included Loss, if any, from line 7. Cain, if any, from line 7 or amount from Gain, if any, from line 31. Net gain or (loss) from Form 4684, lines Ordinary gain from installment sales from Ordinary gain or (loss) from lite light and ordinary gain ordinary gai	as, enter -0 If line 9 is zero, enter unt from line 8 on line 12 below at 0 filed with your return (see instructions) on lines 11 through 16 (include profile 8, if applicable. 34 and 41a. in Form 6252, line 25 or 36	r the gain from id enter the gai etions)	line 7 on line 12 b n from lino 9 as a sar or less):	11 12 13 74	-357.
a and b below. For individual returns, complete lines a and b below: If the loss on line 11 includes a loss from Form 4684, line 38, column (b)(ii), enter that part of the loss here. Enter from property used as an employee on Schedule A (Form 1040), line 27, and the part of the loss see instructions: Postetomer Postetomer	9 Subtract line 8 from line 7. If zero or lettine 9 is more than zero, enter the amotong term capital gain on the Schedule 1 Ordinary Gains and Loss Ordinary gains and losses not included Loss, if any, from line 7. Cain, if any, from line 7 or amount from Gain, if any, from line 31. Net gain or (loss) from Form 4684, lines Ordinary gain from installment sales from Ordinary gain or (loss) from lite light and ordinary gain ordinary gai	as, enter -0 If line 9 is zero, enter unt from line 8 on line 12 below at 0 filed with your return (see instructions) on lines 11 through 16 (include profile 8, if applicable. 34 and 41a. in Form 6252, line 25 or 36	r the gain from id enter the gai etions)	line 7 on line 12 b n from lino 9 as a sar or less):	11 12 13 74	-357.
the part of the loss from income-producing properly on Schedule A (Form 1040), line 27, and the part of the loss here. Enter from properly used as an employee on Schedule A (Form 1040), line 22, Identify as from Form 4797, line 18a.	9 Subtract line 8 from line 7. If zero or let line 9 is more than zero, enter the amotong-term capital gain on the Schedule at III Ordinary Gains and Loss Ordinary gains and losses not included. Loss, if any, from line 7. Cain, if any, from line 7 or amount from Gain, if any, from line 31. Net gain or (loss) from Form 4684, lines Ordinary gain from installment sales from Ordinary gain or (loss) from like-kind excombine lines 10 through 16.	ss, enter -0 If line 9 is zero, enter unt from line 8 on line 12 below at 0 filed with your return (see instructions) on lines 11 through 16 (include profiles 11 through 16 (include profiles 8, if applicable.) 34 and 41a. In Form 6252, line 25 or 36 changes from Form 8824	r the gain from nd enter the gai ctions)	line 7 on fine 12 b n from line 9 as a	11 12 13 74 15 16	
	9 Subtract line 8 from line 7. If zero or le line 9 is more than zero, enter the amo long term capital gain on the Schedule 1 Ordinary Gains and Loss Ordinary gains and losses not included Loss, if any, from line 7. Gain, if any, from line 7 or amount from Gain, if any, from line 31. Net gain or (loss) from Form 4684, lines. Ordinary gain from installment safes from Ordinary gain or (loss) from like-kind exc. Combine lines 10 through 16. For all except individual returns, enter the aland bibelow. For individual returns, enter the aland bibelow.	as, enter -0-, if line 9 is zero, enter unt from line 8 on line 12 below at 0 filed with your return (see instructions) on lines 11 through 16 (include profile 8, if applicable. 34 and 41a. In Form 6252, line 25 or 36. thanges from Form 8824.	r the gain from id enter the gain stions)	line 7 on line 12 b n from lino 9 as a sar or less):	11 12 13 74 15 16 17	
	9 Subtract line 8 from line 7. If zero or le line 9 is more than zero, enter the amo long term capital gain on the Schedule 1 Ordinary Gains and Loss Ordinary gains and losses not included Loss, if any, from line 7. Gain, if any, from line 7 or amount from Gain, if any, from line 31. Net gain or (loss) from Form 4684, lines. Ordinary gain from installment safes from Ordinary gain or (loss) from like-kind exc. Combine lines 10 through 16. For all except individual returns, enter the aland bibelow. For individual returns, enter the aland bibelow.	as, enter -0-, if line 9 is zero, enter unt from line 8 on line 12 below at 0 filed with your return (see instructions) on lines 11 through 16 (include profile 8, if applicable. 34 and 41a. In Form 6252, line 25 or 36. thanges from Form 8824.	r the gain from id enter the gain stions)	line 7 on line 12 b n from lino 9 as a sar or less):	11 12 13 74 15 16 17	
	9 Subtract line 8 from line 7. If zero or let line 9 is more than zero, enter the amotong term capital gain on the Schedule 8	ss, enter -0 If line 9 is zero, enter unt from line 8 on line 12 below at D filed with your return (see instructions) es (see instructions) on lines 11 through 16 (include profile 11 through 16 (include profile 12 below) line 8, if applicable. 34 and 41a. In Form 6252, line 25 or 36 shanges from Form 8824. Stangus from Form 8824.	r the gain from identer the gain etions).	line 7 on line 12 bin from line 9 as a series of less): our return and skip tof the loss here for the	11 12 13 74 15 76 17 (ines	
fine 14 For Paperwork Reduction Act Notice and Section 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040,	9 Subtract line 8 from line 7. If zero or let line 9 is more than zero, enter the amotong term capital gain on the Schedule 8	ss, enter -0 If line 9 is zero, enter unt from line 8 on line 12 below at D filed with your return (see instructions) es (see instructions) on lines 11 through 16 (include profiles 11 through 16 (include profiles 11 through 16 include profiles 1	r the gain from identer the gain etions).	line 7 on line 12 bin from line 9 as a series of less): our return and skip tof the loss here for the	11 12 13 74 15 76 17 (ines	-357,
For Paperwork Reduction Act Notice and on Form 1040,	9 Subtract line 8 from line 7. If zero or let line 9 is more than zero, enter the amo long term capital gain on the Schedule 8	ss, enter -0 If line 9 is zero, enter unt from line 8 on line 12 below ar Dided with your return (see instructions) es (see instructions) on lines 11 through 16 (include problems of the second of	private line of young the part of the part	line 7 on line 12 b. n from line 9 as a par or less): Our return and skip t of the loss here. Indithe part of the l8s form 4797, line 18s	11	-357,
	9 Subtract line 8 from line 7. If zero or let line 9 is more than zero, enter the amo long term capital gain on the Schedule 8	ss, enter -0 If line 9 is zero, enter unt from line 8 on line 12 below ar Dided with your return (see instructions) es (see instructions) on lines 11 through 16 (include problems of the second of	private line of young the part of the part	line 7 on line 12 b. n from line 9 as a par or less): Our return and skip t of the loss here. Indithe part of the l8s form 4797, line 18s	11	-357

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2005	FEDERAL STATEMENTS	PAGE
	WORK ZONE PRODUCTS, INC.	76-051471
STATEMENT 1 FORM 1120, LINE 17 TAXES AND LICENSES		
LICENSES AND PERMITS PAYROLL TAXES	TOTAL <u>\$</u>	21,287. 2,456. 90,699. 114,442.
STATEMENT 2 FORM 1120, LINE 19 CHARITABLE CONTRIBUTION		
CARRYOVER FROM 2003 DISALLOWED CONTRIBUTIONS	S DUE TO 10% LIMIT	360. 5,466. -2,473. 3,353.
STATEMENT 3 FORM 1120, LINE 26 OTHER DEDUCTIONS		
COMPUTER CREDIT CARD FLES DUES AND SUBSCRIPTIONS INSURANCE LEGAL AND PROFESSIONAL LITENS. MAINTENANCE EXPENSE MEALS AND ENTERTAINMENT OFFICE EXPENSE POSTAGE. PRINTING OUANTLITY VARIANCE SECURITY SUPPLIES TELEPHONE TRAVEL UNIFORMS	TOTAL \$	16,049, 2,455, 5,820, 3,212, 122,589, 27,897, 660, 32,720, 8,519, 11,3683, 1,110, 2,155, 16,230, 74,260, 42,279, 26,215, 7,524, 463,156,
STATEMENT 4 FORM 1120, SCHEDULE A, LINE OTHER COST OF GOODS SOLD	5	
QUITMENT RENTAL	\$	44,895. 4,111. 17,743. 18,171. U1,648.

2005	FEDERAL STATEMENTS	PAGE 2
	WORK ZONE PRODUCTS, INC.	76-05147 17
STATEMENT 4 (CONTIFORM 1120, SCHEDUL OTHER COST OF GOO FUEL PROPERTY TAXES SUBCONTRACTORS	E A, LÎNE 5 DS SOLD	\$ 121,847. 14,624. 681,185. PAL \$ 914,224.
STATEMENT 5 FORM 1120, SCHEDUL, 50% OR MORE OWNER NAME : LD NUMBER : PERCENTAGE OWNED :	PATRICIA OAKES	
NOTE NECETABLE - 1	BEGINNING \$ 80,316). 146.453 [
STATEMENT 7 FORM 1120, SCHEDULE OTHER ASSETS CONSTRUCTION IN PROC	BEGINNING	. \$ 31.796
STATEMENT 8 FORM 1120, SCHEDULE OTHER CURRENT LIABIN CREDIT CARDS PAYABLE STATE TAX PAYABLE	L, LINE 18 LITIES	ENDING \$ 29,204. 35.508
	TOTAL \$ 8,194.	

005	FEDE	RAL STA	TEMENTS			PAGE
	WORK	ZONE PRO	DUCTS, INC.			76-051471
STATEMENT 9 FORM 1120, SCHEDULE M-1, I BOOK EXPENSES NOT DEDU OFFICER LIFE INSURANCE F	CTED			TOTAL	40; V7-	4,473. 4,473.
STATEMENT 10 FORM 4562, PART I ELECTION TO EXPENSE CER	TAIN TANGIB	LE PROPER	TY (SECTION 179)			
DESCRIPTION OF PROPERTY						ECTED COST
7-YEAR F&F 7-YEAR F&F 7-YEAR F&F 7-YEAR F&F 7-YEAR HYDRAULIC PREMEI 7-YEAR 8 HP BLOWER 7-YEAR LINE LAZER 3400 7-YEAR TRANTEX 7-YEAR 2005 FORD F450 S 7-YEAR REFRIGERATOR AND 7-YEAR COPTER 5-YEAR COMPOTER	TER STRIPING) FREEZER			49,469, 771, 7,046, 1,716, 6,734, 5,582, 9,000, 1,521, 2,057, 41,234, 2,021, 1,178, 1,170, 1,061, 1,222, TOTAL		15,262. 771 7,046. 1,716. 6,734 5,582. 9,000. 1,521. 2,057. 41,234. 2,021. 1,176. 1,176. 1,061. 1,222. 102,000.
STATEMENT 11 FORM 4797, PAGE 1, PART I SALES OR EXCHANGES OF C DESCRIPTION DATE OF PROPERTY ACQUIRED	ERTAIN PRO DATE SOLD	PERTY HEL SALES PRICE	D OVER ONE YEAR DEPRECIATION ALLOWED	COST OR BASTS		GAIN OR LOSS
SHELVING & BUILTINS 12/31/97 REMODELING 2/07/97	3/31/05 3/31/05		2,619. 605.	2,619 605		0 . 0 .
ELECTRICAL WORK 7/23/97	3/31/05		485.	485		0
LEASEHOLD IMPROVEMENTS 8/31/97 WORKSTATION 12/31/97 FENCE 10/24/01 LEASEHOLD ADDITIONS	3/31/05 3/31/05 3/31/05		3,203. 996. 863.	3,203 996 1,063		0. 0. -200.
12/14/01	3/31/05		100.	257 TOTA		-157. -357.